



MISSOURI CONCRETE ASSOCIATION, INC.

101 E. High Street, P.O. Box 392, Jefferson City, Missouri 65102 (573) 635-6271
RANDY J. SCHERR, Executive Director

MEMO TO: MCA Members
MCA Potential Members

FROM: Randy J. Scherr, MCA Executive Director

DATE: October 20, 2022

SUBJECT: MCA 2023 Annual Convention
Exhibitor/Sponsor Registration

The Missouri Concrete Association's 2023 Annual Convention is quickly approaching. We urge you to mark your calendar for **February 19-21, 2023 for the MCA 63rd Annual Meeting to be held at AMERISTAR Casino * Resort * Spa, St. Charles, Missouri.**

This year the Annual Convention will include several opportunities for members to sponsor selected events and to showcase their company by exhibiting throughout the convention. This year exhibitors, for a fee of \$600.00 for members and \$700.00 for non-members, will have the opportunity to spend over five hours speaking directly to producers within the industry. The exhibit fee will include a 6-foot table and signage. If you have additional needs including electricity or computer connections, please inform the MCA office.

This year, MCA will again offer exhibitors and sponsors 4-6 minutes to address the attendees regarding their products and services.

Exhibitors should plan to be set up by 1:30 p.m. on Sunday, February 19 and tear down after 4:15 p.m. on Monday.

Also available are sponsorships for various Convention functions. You will find those opportunities listed on the enclosed exhibitor/sponsor registration form. The sponsorship opportunities will be available on a first-come first-serve basis.

Room reservations may be made directly with the hotel by calling 855-888-7273. Be sure to inform the hotel that you are attending the MCA Annual Meeting to get the contracted rate of \$139. The discounted room rates are available until January 30, 2023. You may also make reservations online by entering the Group Code MCAB23C where prompted on the Hotel Reservations Page or by following this link: <https://www.ameristarstcharles.com/groups>.

Should you have any questions or comments, please don't hesitate to contact the MCA office at (573) 635-6271. Please send your registration form to MCA, P.O. Box 392, Jefferson City, MO 65102.

RJS:bsr
Enclosure

MISSOURI CONCRETE ASSOCIATION EXHIBITOR/SPONSOR REGISTRATION FORM

2023 Annual Meeting
AMERISTAR • ST. CHARLES, MISSOURI

EXHIBITOR OPPORTUNITIES: (Exhibitor fee includes registration for 1 Person)

	MCA Member	Non-Member
<input type="checkbox"/> Early bird Exhibitor Fee (postmarked by February 3, 2023) *	\$ 600.00	\$ 700.00
<input type="checkbox"/> Exhibitor Fee (after February 3, 2023)	\$ 625.00	\$ 725.00
<input type="checkbox"/> Additional Registrant	\$ 230.00	\$ 255.00

TOTAL EXHIBITOR FEES: \$ _____

* Exhibitor fee includes 4-6 minute presentation at the General Session. *

<input type="checkbox"/> Convention Supporter (Convention Supporters will be listed on a sign and recognized throughout the meeting)		\$ 150.00
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CONVENTION SUPPORTER: \$ _____

SPONSORSHIP OPPORTUNITIES

<input type="checkbox"/> Sunday Reception (Limit 1) Includes registration** for 2 people		\$1000.00
<input type="checkbox"/> Sunday Banquet (Limit 1) Includes registration** for 2 people		\$2000.00
<input type="checkbox"/> Monday Buffet Breakfast (Limit 1) Includes registration** for 2 people		\$1500.00
<input type="checkbox"/> Monday Morning Break		\$ 400.00
<input type="checkbox"/> Monday Lunch with Exhibitors (Limit 1) Includes registration** for 2 people		\$1500.00
<input type="checkbox"/> Monday Afternoon Break		\$ 400.00

TOTAL SPONSORSHIP FEES: \$ _____

** Sponsorship includes badge, meals and access to exhibit hall. **

** Sponsorship will receive special signs and recognition in the program. **

** Sponsorship includes 4-6 minute presentation. **

If you wish to pay by credit card you may email your information to info@moconcrete.com.

Please check one: VISA or MASTERCARD (a 3% service charge will apply)

Charge Card No: _____ Expiration Date: _____ CSV: _____

Name/Address of Card Holder: _____

SPONSOR/EXHIBITOR INFORMATION:

Company Name: _____

Address: _____

City, State, Zip: _____

Contact Person: _____

Name Phone

Email: _____

Person (s) Attending: _____

Special Needs: _____