

Exhibitor Credentials/Guest Pass Order Form 4-Day Exhibitor Badge \$24.00 each (TO BE PICKED UP IN SHOW OFFICE)

				☐ Other	
		GUEST PASS			
Company:					
Address: _					
				Zip:	
Phone:		Fax:			
Email:					
I prefer to pay for the additional Wallet Cards/Guest Passes by: ☐ Check # / ☐ VISA / ☐ MASTERCARD / ☐ AMEX (Checks payable to Marketplace Events) — Guest Passes @ \$5.00 each = \$					
		*Please p	rovide payme	nt information.	
Credit Card Account Number:				Exp. Date:	
Card Holder's Name:				Amount:	
Signature:					

Des Moines Home + Garden Show

666 Walnut Street, Suite 1506 Des Moines, IA 50309