

A Clinic For High School Coaches Given By High School Coaches

DFW Coaches Clinic

Exhibitor Contract

January 29-31, 2027

Clinic Highlights

- ◆ The cost is \$600 for an 8' X 8' exhibitor space
- ◆ Reservations are guaranteed only when the fee is paid. (No refunds after January 22)
- ◆ Only one company and two employees per exhibit space. All salesman, representatives, and dealers must register with the clinic directors.
- ◆ Clinic set-up begins at 8:00 am on Friday, January 29. The first lecture begins on Friday at 12:30 pm and the exhibitor hall closes at 10:30 am Sunday.
- ◆ A discount to Bass Pro Shops Outdoor World will be given to each exhibitor at the clinic. (Good only for the duration of the clinic and only on selected items.)
- ◆ FCA Lecture and speaker on Sunday.
- ◆ Space is limited to the first 80 exhibitors
- ◆ Friday night meal and social.
- ◆ Over 1300 coaches attended last year's clinic.

Hotel Information

Clinic Headquarters:

- ◆ **Embassy Suites Outdoor World at D/FW Airport**, 2401 Bass Pro Drive, Grapevine, TX 76051
- ◆ Phone (972) 724-2600 or (800) EMBASSY
- ◆ To receive the special room rate of \$169, make your reservation by **January 4**, and state that you are attending the *DFW Coaches Clinic*. *Embassy Suites Hotel* provides a complimentary cooked to order breakfast and happy hour each day to each person staying at the hotel. Each room comfortably sleeps four.
- ◆ The Embassy Suites Hotel is located adjacent to Bass Pro Shops and Grapevine Mills Mall. (One of the largest outlet malls in the southwest.)

Registration

- ◆ To pre-register, please send the registration form and a check payable to:
DFW Coaches Clinic
30801 Beck Road
Bulverde, Texas 78163
- ◆ Visit our website for more information or to register
- ◆ **www.coachesclinic.net**
- ◆ E-mail: coachesclinic@yahoo.com
- ◆ **\$600** registration fee if mailed in by January 22 (\$700 after this date, no refunds after January 22)

DFW Coaches Clinic
30801 Beck Road
Bulverde, Texas
78163

Phone: 214-356-4730
Fax: 830-438-5360
E-mail:
coachesclinic@yahoo.com

DFW Coaches Clinic Exhibitor Registration Form

Company Name:	Representative:	Representative:	
Address:	City:	State:	Zip:
Electrical Outlet Needed: Yes / No	Phone:	Fax:	E-mail:

Enclosed is my check for \$_____ covering _____ spaces @ \$600 per space. (\$700 after January 22, no refunds after this date) Make check out to DFW Coaches Clinic and mail to the address above or register online at www.coachesclinic.net - DFW Coaches Clinic reserves the right to refuse any exhibitor. \$50 Cancellation fee per booth.