



# Exhibitor Profile Form

THE GENERAL COUNCIL OF THE ASSEMBLIES OF GOD

1445 North Boonville Avenue . Springfield, Missouri 65802-1894 . [www.generalcouncil.ag.org](http://www.generalcouncil.ag.org)

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## GENERAL COUNCIL EXHIBITS TEAM

• Sharon L. Lee, *Director, Convention Services Group*

• Amanda White, *Exhibitor Services*

## 58th General Council . JULY 30 - AUGUST 4, 2019. ORLANDO, FL

Exhibitor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Contact Name/Position: \_\_\_\_\_

Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Contact Email address: \_\_\_\_\_

The above named company has requested to be an exhibitor at the General Council of the Assemblies of God convention. Your business has been listed as a reference for the above named exhibitor. Please provide the information listed below and return this form to the exhibitor.

Name of reference: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Email address: \_\_\_\_\_

What is the length of experience with this business/individual? \_\_\_\_\_

Please list the type of products or services you received from this business:

\_\_\_\_\_  
\_\_\_\_\_

Would you do business again with them? \_\_\_\_\_ If no, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you have any other comments you think would be helpful to us? \_\_\_\_\_

\_\_\_\_\_

Name and Title of person giving reference: \_\_\_\_\_

Date \_\_\_\_\_