



PEDIATRIC SOCIETY
- Salus Liberorum Sit Maxima Curae Nobis -
191ST SCIENTIFIC CONFERENCE

AUGUST 7-9, 2015
SKAMANIA LODGE, STEVENSON WA
EXHIBITOR AGREEMENT

COMPANY NAME \_\_\_\_\_

PRIMARY CONTACT

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

COMPANY WEBSITE \_\_\_\_\_

PRIMARY BOOTH REPRESENTATIVE CONTACT

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

REPRESENTATIVES STAFFING YOUR DISPLAY (TWO VENDOR TICKET PACKAGES ARE INCLUDED)

1) \_\_\_\_\_ 2) \_\_\_\_\_

PLEASE INDICATE COMPANIES YOU DESIRE NOT TO BE LOCATED ADJACENT TO (I.E. COMPETITOR):

1) \_\_\_\_\_ 2) \_\_\_\_\_

THE SIGNATURE BELOW SIGNIFIES THAT THE COMPANY REPRESENTATIVE HAS READ AND AGREES TO ABIDE BY ALL NPPS EXHIBIT PRACTICES AND REGULATIONS

Signature \_\_\_\_\_ Title \_\_\_\_\_

Your exhibit space includes 6-foot table, two chairs, and registration for two representatives to attend the Saturday Night Dinner, continental breakfasts, and breaks.

- SPONSORSHIP OPPORTUNITY (ATTACHED FORM) SPONSORSHIP AMOUNT
EXHIBITION BOOTH SPACE (PRIOR TO JULY 1, 2015) # OF BOOTHS @ \$ 1100.00 EA
EXHIBITION BOOTH SPACE (AFTER JULY 1, 2015) # OF BOOTHS @ \$ 1200.00 EA
ADDITIONAL EXHIBITOR REP REGISTRATION # OF REPS @ \$ 100.00 EA

TOTAL AMOUNT ENCLOSED \_\_\_\_\_

Check enclosed / Credit card payment section with fields for Name on Card, Billing Address, Signature, and Exp. Date.