

American Nurses Association 2007 Quadrennial Policy Conference:
Exhibit Space Application and Contract
 Hyatt Regency Atlanta ♦ Atlanta, GA
 Exhibition Dates: June 20-22, 2007



This application and contract is by and between the American Nurses Association (referred to as "ANA") and the following exhibiting organization (referred to as "Exhibitor"). ANA agrees to lease to the Exhibitor and Exhibitor agrees to lease from ANA, the booth space(s) approved below of the above event. This information provided below will be used to send all pertinent information.

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Contact Name: _____ Title: _____

Type of Product/Service: _____

Alphabetical Listing: (Indicate under which letter of the alphabet your organization's name should be listed): _____

Number of 10' x 10' spaces: _____ x 100 x \$15.00 per square feet = _____ Plus \$100 per corner exposure = \$ _____
Total Booth Cost

Booth Space Preference: 1. _____ 2. _____ 3. _____ 4. _____

Exhibitor understands that assigned booth space will be rented at a rate of \$15.00 per square foot plus \$100 per exposed corner (if applicable) and agrees to make payments on the following schedule:

1. Due with contract — 50% of total booth cost. Contracts received without deposit **will not be** processed.
2. The complete balance is due June 1, 2007.

Payment: Check, MasterCard or Visa. Please make payment to the American Nurses Association.
Please return application with payment to:
 American Nurses Assoc./Exhibit Manager
 8515 Georgia Avenue, Suite. 400
 Silver Spring, MD 20910-3492
****Questions?** Please call 301/628-5210
 FAX 301/628-5003 E-MAIL exhibits@ana.org

If space rental fee is not paid according to the payment schedule, it may be re-assigned to another exhibitor at the option of ANA and the cancellation fee, as stated below, will be retained by ANA. Exhibitor agrees to abide by the terms of this contract, the official Rules and Regulations, and any applicable provisions of ANA's agreement with the management of the facility where the Exhibition will be held, all of which are made a part of this contract by reference and fully incorporated herein. This is not a binding contract until signed by an ANA representative on behalf of the American Nurses Association. The individual signing on behalf of the Exhibitor warrants he/she is authorized to do so.

Once you have reserved space, you will receive a confirmation letter with an invoice of the balance due. You will receive an Exhibitor Service Manual approximately 2 months prior to the conference. The manual will provide information on event schedules, housing, service contractor, advertising, etc.

 Authorized Exhibitor Signature

 Credit Card Number Exp. Date

 Authorized ANA Signature

 Signature

Cancellation/Refund Policy: Any request for cancellation or reduction of booth space must be submitted in writing and is subject to the following refund schedule and terms: 1) on or before May 1, 2007, 25% of booth fee is retained by ANA; 2) from May 1, 2007 to May 31, 2007, 50% of total booth cost is retained by ANA; and 3) after June 1, 2007, 100% of total booth cost is retained by ANA. The date the Exhibitor's written request of cancellation is received by ANA will be considered the official cancellation date.

Official ANA Use Only:
 Approved Booth Number: _____
 _____ sq/ft. x \$15.00 per sq/ft = \$ _____
 _____ Number of corners _____ x \$100 = \$ _____
 Subtotal = \$ _____
 Less Discount = \$ _____
 Total Booth Cost = \$ _____

PAYMENTS:
 Check # _____ Date: _____ Amount: _____ Balance: _____
 Check # _____ Date: _____ Amount: _____ Balance: _____
 Check # _____ Date: _____ Amount: _____ Balance: _____