University Professional &	
Continuing Education Association	

2012 UPCEA ANNUAL CONFERENCE Application to Contract for Exhibit Space

97th Annual Conference - March 28-30, 2012 - Portland, Oregon

By signing this Application to Contract for Exhibit Space (hereinafter "Exhibit Contract"), the exhibitor agrees to abide and be bound by these terms as well as the attached Exhibitor Rules and Regulations and all amendments thereto and decisions of UPCEA and its official contractor. **INSTRUCTIONS:**

- (1) Please read carefully this Exhibit Contract and the terms and conditions of the attached Conference Exhibitor Rules and Regulations.
- (2) Complete this Exhibit Contract in full and sign in the space provided below. An unsigned Exhibit Contract will not be accepted. Full payment is due at the time of execution in order to reserve a booth. Payment by check or credit card is accepted. Please sign and return the completed Exhibit Contract with <u>check payment</u> to UPCEA, Dept. 6048, Washington, DC 20042-6048 or if <u>paying by credit card</u> you can mail, fax or email the completed Exhibit Contract to Attn: Shelby Scango, UPCEA, One Dupont Circle, Suite 615, Washington, DC 20036; Fax: 202-785-0374; Email: sscango@upcea.edu. Please keep a copy for your records.
- (3) In the event you need to cancel, a full refund will be granted if notice of cancellation is received in writing before January 27, 2012; 50% if written notice of cancellation is received by February 27, 2012; and 0% if written notice of cancellation is received after February 27, 2012.

PRODUCT/ SERVICE TO BE EXHIBITED

COMPETITORS FROM WHOM WE REQUEST BOOTH SEPARATION

BOOTH SPACE: Assignments will be made on a first-come, first-served basis by UPCEA. Space will not be assigned until full payment is received.

(1)	Exhibitor Single Booth Rate: \$2,500	Exhibitor Double Booth Rate: \$5,000	Number of booths reserved:	
(2)	Total cost of space reserved: \$	_		
(3)	Booth choice(s): 1st 2nd	3rd 4th	5th	We will make every effort to accommodate requests.
(4)	List company information as it should app	ear in conference materials:		accommodate requests.
	COMPANY NAME:			
	Address:			
	City/State/Zip:			
	Contact Name:			
	Contact Title:			
	Phone:	Fax:	_ E-Mail:	
	Authorizing signature:	exhibitor to notify UPCEA of any changes in the con	tact person, address, pho	one, fax or e-mail.

50-WORD DESCRIPTION OF COMPANY PRODUCTS/SERVICES TO BE LISTED IN FINAL CONFERENCE PROGRAM: (Description can be attached on separate page).

PLEASE COMPLETE AND RETURN THIS APPLICATION WITH YOUR FULL PAYMENT (CHECK PAYABLE to UPCEA; PROVIDE CREDIT CARD INFORMATION BELOW)

If you have any questions regarding this application form, please contact Shelby Scango, Administrative and Meetings Coordinator; Phone: 202-659-3130; Email: <u>sscango@upcea.edu</u>		Payment: Amt. \$ □ Check or □ Credit Card □ VISA □ MC □ AmEx Exp. date Signature: (Please print Card Holder Name) Security Code: Security Code: Security Code: Security Code:		
For UPCEA Use Only: Date Contract Received:	Booth Assigned:			Acknowledged:
Full Booth Cost:	Payment:	(ck#)	Balance Due: