



# Exhibit Reservation Form

## Exhibit Dates: July 21-23, 2019

Complete all information. All correspondence will be directed to your designated contact person. Three complimentary registrations will be provided for each 100 sq. ft. booth space reserved.

COMPANY \_\_\_\_\_  
(Print or type your name as you wish it to appear - only one company name is allowed per exhibit space)

ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE OR PROVINCE \_\_\_\_\_

POSTAL CODE/ZIP +4 \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ EMAIL \_\_\_\_\_

WEBSITE \_\_\_\_\_

**BOOTH TYPE:**     **SINGLE (\$3,350)**     **DOUBLE (\$6,700)**     **QUAD (\$13,400)**     **CORNER (ADD \$210)**  
10' x 10'                      10' x 20'                      20' x 20'

SUSTAINING MEMBERS PLEASE CHECK THE APPROPRIATE BOX TO RECEIVE YOUR DISCOUNT. Contact the Association office to learn more about becoming a Sustaining Member.

**SUSTAINING MEMBER**                       **SILVER SUSTAINING MEMBER**                       **GOLD SUSTAINING MEMBER**  
(\$300 DISCOUNT OFF TOTAL AMOUNT DUE)                      (\$500 DISCOUNT OFF TOTAL AMOUNT DUE)                      (\$750 DISCOUNT OFF TOTAL AMOUNT DUE)

AMOUNT TO BE CHARGED OR INVOICED \$ \_\_\_\_\_     FULL BOOTH PRICE  
U.S. Funds on U.S. Bank                       DEPOSIT \$600/100 SQ. FT.

PAYMENT TYPE:     CHECK                       INVOICE  
 MASTERCARD                       VISA                       AMERICAN EXPRESS                       DISCOVER

ACCOUNT NUMBER \_\_\_\_\_

CARD ID #\* \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ CARDHOLDER SIGNATURE \_\_\_\_\_

\*Visa, Mastercard and Discover: See 3-digit Card ID number on the back of the card after account number. American Express: See 4-digit, non-embossed number printed above your account number on the face of your card.

### AGREEMENT:

**PAYMENT:** A deposit of \$600 per 100 sq. ft. is required to hold your space or if payment does not accompany this form, Exhibitor agrees to pay such deposit within thirty days of invoice. Any balance on total booth space will be due no later than March 29, 2019. Reservations received after this date must be paid in full.

**BOOTH ASSIGNMENT:** Booth selection by Exhibitors will begin in March of 2019. Selection order will be prioritized based on sponsorship level and the order in which paid reservations are received (full deposits are also acceptable).

**CANCELLATION:** Exhibit space can be cancelled prior to March 30, 2019 with full refund. Between March 30–May 31, 2019 cancellations will incur, a \$600 processing fee per 100 sq. ft. After May 31, 2019, no refunds will be made for cancellations. All cancellations must be submitted in writing to the Assistant Director.

Exhibitor's signature below signifies that Exhibitor has read, understands and agrees to be bound by all the terms and conditions on this form and the Regulations and Liability Statement for the International Association for Food Protection's Annual Meeting Exhibits (see online).

Signature Required \_\_\_\_\_

Date \_\_\_\_\_

Return to the IAFP Registration Desk

Fax: +1 515.276.8655

E-mail: Farrah Benge | fbenge@foodprotection.org

Direct Questions to:

David Larson | dave@larsonent.com

Phone: +1 515.440.2810

