

FHCA 2012 TRADE SHOW EXHIBIT CONTRACT

EXHIBITOR INFORMATION

PRINT or TYPE information as it should appear on all signs and printed materials.

Company Name _____

Primary Contact _____ Title _____
(for published materials)

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____ Website _____

Courtesy Contact _____ Title _____
(to receive logistical communications)

Phone _____ E-mail _____

EXHIBIT COSTS

On or before Friday, June 15, 2012

FHCA Member _____ Nonmember _____
 ___ \$910 ___ \$1,410

After Friday, June 15, 2012

FHCA Member _____ Nonmember _____
 ___ \$1,310 ___ \$1,810

Become a member and purchase your booth at the member rate! See page 4 of the Exhibitor Prospectus for details.

FHCA Associate Member Dues..... \$600*

FHCA Associate Plus Member Dues..... \$800*

***Discount your dues payment \$25 if you pay in full prior to January 31, 2012.**

Associate Member Support Committee (AMSC) Dues..... \$150

See the Exhibitor Prospectus for details on pricing:

No. Booth(s) _____ x \$ _____ \$ _____
 (discount \$100 for each additional booth) - \$ _____

Sponsorship Amount \$ _____

Brochure/Program Advertisement \$ _____

FHCA Associate Member Dues \$ _____

AMSC Dues \$ _____

TOTAL \$ _____

List below competing companies you **DO NOT** wish to be near.

IMPORTANT

Please review the floor plan and indicate booth preference.

Number of booths: _____

Booth Choices:

1st Choice _____

2nd Choice _____

3rd Choice _____

4th Choice _____

5th Choice _____

PAYMENT INFORMATION

Check enclosed made payable to FHCA American Express MasterCard VISA

Credit Card No. _____ Exp. Date _____

Cardholder Name _____

City _____ State _____ Zip _____

Signature _____

FHCA use only

Member No.	Date Received	Payment	Booth(s) Assigned	Processed

PLEASE NOTE

The Contact Person named on the front side of this form, as well as the person submitting the form (if different), will be sent an Exhibitor Services Kit from Shepard Exposition Services, including shipping forms, instructions, and any additional information by e-mail. FHCA will also use e-mail to send the pre- and post-conference attendee lists as well as other important communications.

SPECIAL SPONSORSHIPS

Take advantage of the exposure and recognition your company will gain by becoming a Special Sponsor! We offer a variety of opportunities, as well as price ranges. See the Sponsorship Opportunities in the Exhibitors Prospectus or contact Kendall Peddie **via phone at (800) 771-3422 or email at kpeddie@fhca.org**. If you would like to purchase a sponsorship at this time, *please include payment on the reverse and indicate the sponsorship below:*

PRODUCTS/SERVICES DESCRIPTION

PRINT a description of your company's products and/or services to be used in publication materials (25 words or less).

Use our description from the 2011 show.

PRIZES & PRIZE ANNOUNCEMENTS

Provide a prize for attendees to win, right from your booth! A list of exhibitors and prizes will be published in conference materials. Prize information must be supplied to FHCA on or before **June 30, 2012** to meet the publication deadline. Attendees must claim their prizes from exhibitors; exhibitors are responsible for delivering unclaimed prizes to the winners.

Yes, we will supply a prize. Item: _____
 No, we will not supply a prize.

Please read the following information carefully. This Contract is invalid unless it is signed and dated below. Please send a copy of the trade show rules and regulations and this Contract to the person who will be responsible for the exhibit on-site at the Trade Show so that person will understand the terms of the contract.

Florida Health Care Association (herein referred to as Show Management) is hereby authorized to reserve space for our use in the exhibit area July 30 & 31, 2012 for the FHCA 2012 Annual Conference & Trade Show at the Orlando Hilton, Orlando, Florida. We agree to send the full payment for our booth(s), application for membership, and sponsorship, if applicable, with this contract. It is understood and agreed that Show Management will endeavor to assign space in accordance with our request. If our company wants to be near another company, the contracts and payments should be received together. In the event all our booth choices have been previously assigned, Show Management reserves the right to assign space as equitably as possible.

Cancellation must be in writing to and approved by Show Management. With notification received prior to June 15, 2012, a refund will be issued, minus an administrative fee of \$200 per booth cancelled. **After June 15, 2012, no refunds of any type will be issued. Companies which purchase booth space after June 15, 2012 will not be entitled to any refund.**

I have read the entire terms of the Contract and accept the stipulations outlined as the representative of my company.

Signature _____ Date _____

Submit this completed form with payment to FHCA by fax at (850) 681-2075 or mail at P.O. Box 1459, Tallahassee, FL 32302. E-mail Kendall Peddie at kpeddie@fhca.org with questions.