



EXHIBITOR APPLICATION



INFORMATION

Please print or type. This information will be used for all publications, signage, brochures, etc.

Company Name _____ Company Web site _____

Mailing Address _____

Primary Contact _____ Email Address _____

Telephone _____ Fax _____

☐ Check here if you are a paid conference attendee – you will receive a 25% discount on exhibitor fees

TABLETOP EXHIBIT

Consists of one 10' x 10' exhibit space with one 8' dressed table and two chairs for representatives. Electricity is provided.

☐ Full Two-Day Exhibit (Saturday, May 29 - Sunday, May 30) **\$500**

☐ One-Day Exhibit (Saturday, May 29 **OR** Sunday, May 30) **\$300**

INFORMATION DISPLAY TABLE ONLY

All materials must be shipped to IRSF by Friday April, 30th.

☐ Full Two-Day Display (Saturday, May 29 - Sunday, May 30) **\$350**

☐ One-Day Display (Saturday, May 29 **OR** Sunday, May 30) **\$150**

HELPING HANDS PROGRAM JOURNAL

Place an Ad, special message and/or a picture in our Program Journal using one of the following sponsorship opportunities. Other key sponsorships are available; for more information please contact the IRSF office at 1800-818-RETT (7388).

☐ **Hospitality Sponsor: \$400** - a full page Ad in the Program Journal with a message of your choice

☐ **Silent Angel Sponsor: \$300** a 1/2 page Ad in the Program Journal with a message of your choice

☐ **Family Sponsor: \$200** – a quarter page Ad in the Program Journal with a message of your choice

☐ **Honorable Sponsor: \$100** - an eighth white page in the Program Journal with a message of your choice

☐ **Listing: \$50** – Family/Silent Angel/Company name listed in the Program Journal

PAYMENT*

***A non-refundable deposit, 50% of the total registration cost, must accompany this application. The remaining balance is due by Friday, April 30, 2010.**

☐ Check (Made payable to IRSF)

☐ Purchase Order (# _____)

☐ Credit Card

Card Type: Visa / MC / Amex - Card #: _____ Exp. Date: _____

Name on Card: _____ Signature: _____

I, _____ an authorized representative of _____ agree to the terms and conditions of this registration.

Please mail completed form to IRSF Conference, 4600 Devitt Drive, Cincinnati, OH 45246 or fax to 513-874-2520



Terms and Conditions

- Insurance and liability are the full and sole responsibility of the exhibitor
- IRSF is not responsible for any lost, damaged or stolen items. The exhibitor is fully liable for all exhibit materials/contents (products, demos, collateral, etc). It is recommended that the exhibit not be left unattended at any time and that all valuable materials are removed and securely stored at the end of each exhibiting day.
- IRSF is not responsible for tabletop exhibit materials shipped directly to the conference site.
- Materials for display only table must be approved in advance and should be shipped directly to IRSF by the assigned deadline.
- Failure to remit full payment prior to the date specified on the application form constitutes cancellation of registration and the reserved space will be subject to resale without refund of deposit.
- The exhibitor will be responsible for an applicable registration fees if they fail to cancel registration on or prior to the specified registration deadline.
- IRSF will assess a \$50 fee for any returned checks
- The exhibitor is responsible for all travel arrangements and accommodations for employees/representatives. A special rate has been negotiated for hotel accommodations (subject to availability). The exhibitor must contact the hotel directly to secure this rate.
- Exhibit hours are from 8:00 am – 4:30 pm Mountain Time

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