LLA 2010 ANNUAL CONFERENCE NON-PROFIT EXHIBIT AGREEMENT

Street City State Zip	Company or Organization Name			
Street City State Zip Telephone	Contact Person		Name on Badge	
Street City State Zip	Address			
Representatives attending conference if different from contact person listed above: Name	Street	City	State	Zip
Representative Address (if different from above) 2. Name	Telephone ()	Fax ()		E-mail
Representative Address (if different from above) 2. Name	Representatives attending conference if differ	rent from contact person listed a	above:	
Representative Address (if different from above) 2. Name	1. Name		Name on Badge	
Name Name on Badge E-mail Representative Address (if different from above)				E-mail
Representative Address (if different from above) Product or service to be exhibited	Representative Address (if different from above	/e)		
Product or service to be exhibited	2. Name		Name on Badge	
Product or service to be exhibited	Representative Address (if different from above	(A)		E-mail
Tentative Exhibit Schedule:				
Exhibit Setup: Wednesday, March 10, 12 Noon –5:00 PM Exhibits Open: Thursday, March 11, 2010, 7:45 AM—5:00 PM and Friday, March 12, 2010, 8:00 AM—3:00 PM Exhibits Breakdown: Friday, March 12, 3:00-5:00 PM Exhibits Fee: The cost of one booth is \$150.00. The exhibit fee covers up to two representatives, additional representatives and guests are welcome for an additional \$50.00 per person. Please note that we cannot guarantee preferred booth assignment. Exhibit Services Contractor: Wireless and electrical services may be ordered at a later date, we will notify you when the form is available. Does your company need a free identification-by-name sign? □Yes □No Company name for free sign Please ReserveExhibit Booths for my company at \$150.00 each By execution of this agreement, Exhibitor agrees to lease space at the 2010 LLA annual conference. This contract is subject to terms and conditions as stated above. By signature on this contract, Exhibitor agrees to abide by the contract terms and conditions and LLA Rules and Regulations. SignatureTyped Name and Position	Product or service to be exhibited		Prefer	red Booth Assignment
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	Name on Credit Card (Please print):		Signat	ure:
OFFICE USE ONLY: Received: Date Processed: Check #: Amount: CC auth:	OFFICE VAL OVA V			