



**International
Hazardous Materials**
Response Teams Conference
EXHIBITOR AGREEMENT

*Exhibits: May 21-22 ♦ Conference Sessions: May 19-23 ♦ DOD Day: May 19
Baltimore Marriott Waterfront ♦ Baltimore, MD*

Office Use Only

Booth Assigned _____
Date Processed _____
ID# _____

1) Contact Information ***All Fields Required***

Please type or print the following information. Information will be used for conference signage, exhibitor listings and badges.

Company: _____

Web site: _____

Primary Contact: _____

**This person will receive all show information from the IAFC **

Address: _____

City: _____ St/Province: _____ Zip: _____

Country: _____

Direct Phone: _____ Fax: _____

Direct Email: _____

Confirmation is sent via email.

Authorized Signature _____

The signature above acknowledges receipt and agreement to abide by the booth payment schedule and to all show rules and regulations.

2) Payment & Cancellation Policies

- Exhibit space will not be held without a completed and signed exhibitor agreement
- A nonrefundable deposit equaling 50% of the total cost of space requested must accompany this application. An invoice will be sent via email as part of space confirmation. The balance is due **February 26, 2010**. Applications received after this date must include full payment.

Cancellation Policy: If written cancellation is received by February 26, 2010, 50 percent of total due will be retained by the IAFC. No refunds after February 27, 2010. Show Management reserves the right to cancel exhibitor's contract for non-compliance, reassign booth location, or take possession of said space without refund.

3) Exhibit Space Selection

Floor plan will available at www.iafc.org/hazmat

List choices in order of preference:

1. _____ 2. _____ 3. _____ 4. _____

4) Exhibit Space Fees:

Department of Defense Day Tabletop Exhibit: 5/19/10

Number of tabletop exhibits x \$200 = \$ _____

Hot Zone Exhibit Space: Standard 8'x10' booth

Number of booths x \$1,000 = \$ _____

Outdoor Exhibit Space

Dimension of Space (in multiple of 10') _____ x _____

Number of 100 sq. ft. areas _____

x \$250 with indoor space reserved = \$ _____

x \$500 outdoor exhibit only = \$ _____

Tabletop Exhibit Space:

Number of 6' tables x \$750 = \$ _____

After March 31, 2010 add \$100 = \$ _____

5) Method of Payment

Check Payable to IAFC

AMEX VISA MasterCard Discover

Card # _____ CSV# _____
3 or 4 digit security code

Exp Date: _____ Amount to Charge: \$ _____

Name as it appears on card: _____

Authorized Signature _____

6) Return form and appropriate deposit to:

Mail with check to: International Association of Fire Chiefs
PO Box 75649, Baltimore, MD 21275-5649

FAX with credit card information to: 703/273-9363

For more information, please contact Kelly Casillo, Exhibit Sales Manager at 703/537-4840 or kcasillo@iafc.org