PSAHPERD 2010 Convention
APPLICATION and CONTRACT for EXHIBIT SPACE
November 11-13, Seven Springs Mountain Resort, Champion, PA

Firm Name _____ Phone _____
Contact _____
Address _____
_____
e-mail _____ website _____

(Note: head sign information and future communications will conform to the above address unless otherwise indicated.)

Description of your product or service as you would like it to appear in the convention program:

_____
_____
_____

Representative names (2) for badge and program _____

Exhibit Hall Demonstration Time? yes _____ no _____
Electrical Service for an additional fee? yes _____ no _____ order form will be sent with confirmation letter
Convention bag "Stuff It" program ? yes _____ no _____ $75 for attending exhibitors, $100 for non.

Before 9/15/10 # of booths_____ x $350.00 Commercial = $ _____
After 9/15/10 # of booths_____ x $375.00 Commercial = $ _____
Before 9/15/10 # of booths_____ x $250.00 Non-profit = $_____
After 9/15/10 # of booths_____ x $275.00 Non-profit = $_____

Booth Choice (select 6) _____

Deposit Enclosed $_____ (Checks payable to PSAHPERD)
Visa or MasterCard #_____ expiration date _____
Authorized Signature_____ today's date _____

Terms: A $100 deposit is required with the application. The remaining fee is due by September 15, 2010. Applications received after this deadline are not guaranteed a listing in the convention program. Written notice of cancellation is required. A fee of 25% will be assessed for booth cancellations received after September 30, 2009; 50% fee after October 31, 2009. If you do not show up at the convention, your booth fees will not be refunded.

Responsibility Clause Exhibitor assumes responsibility and agrees to indemnify and defend the PA State Association for Health, Physical Education, Recreation and Dance, Seven Springs Mountain Resort, and their agents against any claims or expenses arising out of the use of the exhibition premises. The Exhibitor understands that neither the PA State Association for Health, Physical Education, Recreation and Dance does not maintain insurance covering the Exhibitor's property and it is the sole responsibility of the Exhibitor to obtain such insurance.

Please send to: *Marcy Jack*
PSAHPERD Convention Exhibits
560 Shrader Street
Springdale, PA 15144
Fax: 724-274-4427 mljac@nb.net *phone: 724-274-6192*