



acvim animal wellness expo

2010 • a n a h e i m • c a

# APPLICATION & CONTRACT FOR EXHIBIT SPACE

## 2010 ACVIM Animal Wellness Expo: June 12, 2010

Anaheim Convention Center – Anaheim, CA

Complete and mail this contract to ACVIM, 1997 Wadsworth Blvd., Suite A, Lakewood, CO 80214-5293 or FAX to 303-231-0880. For additional information, please visit [www.ACVIMForum.org](http://www.ACVIMForum.org) or contact Jess Green, ACVIM Forum Event Planner & Publications Manager, at [Jess@ACVIM.org](mailto:Jess@ACVIM.org).

CONTACT NAME (PLEASE PRINT CLEARLY)	CONTACT TITLE (PLEASE PRINT CLEARLY)
COMPANY NAME (AS IT SHOULD APPEAR ON THE BOOTH ID SIGN)	CONTACT'S ADDRESS / CITY / STATE / ZIP (IF DIFFERENT FROM COMPANY ADDRESS)
ADDRESS <input type="checkbox"/> (CHECK THIS BOX IF NEW ADDRESS)	TELEPHONE NUMBER FAX NUMBER
CITY, STATE/PROVINCE, ZIP	E-MAIL ADDRESS (PLEASE PRINT CLEARLY)
WEBSITE/URL (AS IT SHOULD APPEAR ON THE BOOTH ID SIGN)	PRODUCT CATEGORY

List any companies you do not wish to be located near:

Please list goods and/or services to be provided (i.e. giveaways, health screenings, products, promotional materials):

Booth Space	Unit Price	Quantity	Total Cost	Payment Method
10' x 10' • 6' draped (maroon) table • 2 standard chairs	\$75 USD			Amount paid with Contract:\$ USD
Easy up Tent (No side walls) <i>Please note the event will be held outside</i>	\$130 USD			Check # (Payable to ACVIM):
				Credit Cards Accepted: VISA / MasterCard / AMEX (circle one) CC #:
				Exp.: Security Code (Required):
				Cardholder Name:

ACVIM accepts Visa, MasterCard, AMEX or checks drawn on a US bank.

**PAYMENT:** Due in full with application.

**CANCELLATION POLICY:** Cancellations requested in writing by April 1, 2010 are subject to a cancellation fee equal to 50% of the total cost of the booth(s). No refunds will be granted after April 1, 2010. Event will be held rain or shine and no refunds will be issued due to inclement weather.

The undersigned acknowledges agreement to abide by the Rules & Regulations Governing Exhibits as published by the ACVIM, which regulations are considered to be a part of this agreement between Exhibitor and the ACVIM if this application is accepted.

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_ COMPANY: \_\_\_\_\_

### FOR ACVIM USE ONLY

DATE REC'D	TOTAL AMT DUE	DEPOSIT REC'D	CHECK # / CC	ACCEPTED BY ACVIM	BAL DUE
DATE BAL REC'D	AMOUNT REC'D	CHECK # / CC	BALANCE	BOOTH ASSIGNED	