

# Application to Exhibit

---

ORGANIZATION \_\_\_\_\_

---

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

---

NAME OF PRIMARY CONTACT TO MAKE BOOTH ARRANGEMENTS AND RECEIVE CONFIRMATION      TITLE      PHONE      E-MAIL

---

NAME OF CONTACT TO APPEAR IN PROGRAM LISTING      TITLE      PHONE      E-MAIL

**Returning Exhibitor:**  YES    NO   *If yes, please indicate which year(s):*    2019    2018    2017    2016    2015

Organizational Type	Booth Type	Full Badges	Hall Passes	Early Bird June 15	Advance Rate June 16-Mar 8	Regular Rate after Mar 8
Corporate, Commercial, Company, Hospital	10x10 Prime	1 Comp	2 Comp	\$2,500	\$2,900	\$3,200
Corporate, Commercial, Company, Hospital	10x10 Standard	1 Comp	2 Comp	\$2,200	\$2,550	\$2,700
Government Agency, Non-Profit*	10x10 Standard	1 Comp	2 Comp	\$2,200	\$2,550	\$2,700
Government Agency, Non-Profit*	8x10 Standard	1 Comp	\$100 each	\$1,550	\$1,650	\$1,850
Tabletop Exhibit**	6 ft. Skirted Table	Full Price	2 Comp	\$1,000	\$1,150	\$1,350
ACNM Affiliate, ***	6 ft. Skirted Table	Full Price	2 Comp	\$1,000	\$1,100	\$1,350

\*501(c)3 or 501(c)6. Proof of non-profit status is required; please forward a copy of incorporation papers when you apply.

\*\*Tabletop exhibits are reserved for companies with 5 or fewer employees and in business for 5 or fewer year.

\*\*\*Affiliates receive a \$200 discount

**Number of Booths :** \_\_\_\_\_ x \$ \_\_\_\_\_ per booth = \$ \_\_\_\_\_ Total Booth Cost

**Booth Selection:** Booth assignments are made on a first come, first serve basis. Please note your top three choices for booth locations below.

**Preferred Booth Choices:** 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_      **Preferred Booth Orientation:**    Corner    Inline    Island

A 50% non-refundable deposit must be received with the application. If you are applying on-site, you will be invoiced within 30 days and the deposit will be due at that time. Final balance is due within 30 days following deposit. All booths must be paid in full by March 3, 2014. No refunds will be given for space cancelled after this date. After March 6, 2020, all new booth applications must be paid in full. See cancellation clause in Exhibit Guidelines for more information. Please copy for your records. **Return original and deposit in check form to ACNM Annual Meeting & Exhibition, Lock Box P.O. Box 758898, Baltimore, MD 21275-8896. For credit card payment, please e-mail to [mark@stellatosolutions.com](mailto:mark@stellatosolutions.com)**

The undersigned agrees to all the policies set forth in the Exhibitor Prospectus and hereby authorizes the American College of Nurse-Midwives (ACNM) to reserve exhibit space at the JW Marriott Austin. The undersigned also agrees to pay a 50% non-refundable deposit of the total cost of booth space at time of submission of application.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_