

# Indiana Funeral Directors Association 128th Annual Convention - May 5-8, 2008

## Contract for Exhibit Space

Date: \_\_\_\_\_

You are hereby requested and authorized to reserve exhibit space as indicated below for use at the Indiana Funeral Directors Association Convention Exhibit to be held on May 5-8, 2008 at the Indiana Convention Center, 100 South Capitol Avenue, Indianapolis, Indiana 46225.

### INDICATE CHOICE

Booth Size  
Needed:

1. Space Nos. \_\_\_\_\_ at \$ \_\_\_\_\_
2. Space Nos. \_\_\_\_\_ at \$ \_\_\_\_\_
3. Space Nos. \_\_\_\_\_ at \$ \_\_\_\_\_

\_\_\_\_\_

Full Payment

Half Payment (balance due by April 5, 2008)

Exhibitors will be assigned space in accordance with their preferences, as is possible. If we are unable to assign space in accordance with your preferences, an attempt will be made to assign comparable space in the same general location. We will be unable to customize any booth size, please reserve booths accordingly.

Type of Merchandise to be displayed \_\_\_\_\_

Exhibitor's authorized representative specifically in charge \_\_\_\_\_

Lettering for standard sign should read:

One line for Name \_\_\_\_\_

One line for City and State \_\_\_\_\_

### Signature Required:

Company \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Person filling out contract \_\_\_\_\_

**PAYMENT:**  Check Enclosed for the amount of \_\_\_\_\_

(please make checks payable to the Indiana Funeral Directors Association, Inc.)

### CREDIT CARD PAYMENT

Visa

Master Card

Amex

Discover

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature (required) \_\_\_\_\_

Amount Charged \_\_\_\_\_ 3 Digit Security Code (on back of card) \_\_\_\_\_

We understand that there will be no refund if we cancel this contract after April 5, 2008. We hereby accept the exhibit space assigned to us. All rules and regulations governing the exhibit have been read by us and are hereby accepted and made a part of this contract, and we agree to comply by them. We agree to indemnify and hold harmless the sponsoring organization, exhibit facilities, and any officer or member of these organizations or their subcontractors for any loss, damage or injury sustained by an exhibitor or any other person including but not limited to fire, theft, water or accidents of any kind.

### For IFDA Use Only

Application Received \_\_\_\_\_

Assigned Booth No(s). \_\_\_\_\_

Price \$ \_\_\_\_\_

Check # \_\_\_\_\_ CC Authorization \_\_\_\_\_

Deposit Received \$ \_\_\_\_\_

Balance Due \$ \_\_\_\_\_