

# Exhibitor Application

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Website \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
Company Contact \_\_\_\_\_  
Phone ( ) \_\_\_\_\_ Email \_\_\_\_\_  
On-Site Contact \_\_\_\_\_  
Cell ( ) \_\_\_\_\_ Email \_\_\_\_\_

## EXHIBIT BOOTH STAFF:

The exhibit booth fee includes **two complimentary** badges. Please indicate names of company individuals staffing the booth; repeat the contact name listed above if that person is also working the booth. Badges for additional staff may be purchased at \$55 each.

1. \_\_\_\_\_  
(Name, Title, and Email) -- COMPLIMENTARY
2. \_\_\_\_\_  
(Name, Title, and Email) -- COMPLIMENTARY
3. \_\_\_\_\_  
(Name, Title, and Email) -- ADD'L BOOTH STAFF @ \$55.00
4. \_\_\_\_\_  
(Name, Title, and Email) -- ADD'L BOOTH STAFF @ \$55.00
5. \_\_\_\_\_  
(Name, Title, and Email) -- ADD'L BOOTH STAFF @ \$55.00

Check here if any of your staff has a disability and may require reasonable accommodation(s) to fully participate in expo activities. You will be contacted to discuss your specific needs.

## EXHIBIT BOOTH PREFERENCES:

Provide preferred booth numbers in the spaces below. Booths are assigned in order of receipt of contract and payment. See exhibit floor plan on page 5 for booth numbers. For current available booths, view the [online Interactive Exhibitor Floorplan](#).

First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_ Third Choice \_\_\_\_\_ Fourth Choice \_\_\_\_\_

## PROGRAM GUIDE DESCRIPTION/LOGO:

Provide your **LOGO and a 25 word DESCRIPTION OF SERVICES ONLY for company/product** to be printed in the official program. In addition, your company name and web address, as noted above, will appear. If you were a 2017 exhibitor, your 2017 description and logo will be used unless otherwise provided. **Please email to [mlander@cahsah.org](mailto:mlander@cahsah.org) by February 28, 2018.**

**CAHSAH and CHAPCA reserve the right to edit entries as deemed necessary.**

- please continue on the next page -

Repeat Company Name \_\_\_\_\_

**BOOTH FEES:**

**Total Cost of Booth(s)** (see below) # of Booths \_\_\_\_\_ x Booth Fee(s) \$ \_\_\_\_\_ = \$ \_\_\_\_\_

*If your company is not a current affiliate or associate, you must pay the non-affiliate/non-associate booth fee. Or you may join CAHSAH by applying online at www.CAHSAH.org and paying affiliate dues.*

**Additional Name Badges** # of Additional Name Badges \_\_\_\_\_ x \$55.00 each = \$ \_\_\_\_\_

**TOTAL AMOUNT DUE** \$ \_\_\_\_\_

**PAYMENT:**

Method of Payment (Pre-payment is REQUIRED)

\_\_\_\_\_ Check # \_\_\_\_\_ (Make check payable to CAHSAH)

\_\_\_\_\_ Charge      

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder Name (please print) \_\_\_\_\_

Billing Address \_\_\_\_\_

Signature \_\_\_\_\_

**CONTRACT SIGNATURE:**

The undersigned hereby requests exhibit space for the 2018 CAHSAH • CHAPCA Exhibit Show to be held at Monterey Conference Center, Monterey, CA, May 22-23, 2018. I understand that this application becomes a contract when signed and accepted by CAHSAH. I agree to abide by all terms and conditions of the exhibit. I understand that no refunds will be made for cancellations postmarked after April 1, 2018, and that all requests for cancellations and refunds must be in writing. I understand that all fees must be paid in order to reserve a booth space.

\_\_\_\_\_  
(Name and Title) PLEASE PRINT

Signature \_\_\_\_\_ Date \_\_\_\_\_

**BOOTH PRICES:**

Booth prices if registration is received by February 28, 2018	Booth prices if registration is received after February 28, 2018
<input type="checkbox"/> CAHSAH Affiliate/CHAPCA Associate: \$1,250	<input type="checkbox"/> CAHSAH Affiliate/CHAPCA Associate: \$1,400
<input type="checkbox"/> Non-Affiliate/Non-Associate: \$1,750	<input type="checkbox"/> Non-Affiliate/Non-Associate: \$1,900

**CONFIRMATIONS:**

You will receive a confirmation letter confirming your exhibitor booth application.

**RETURNS AND REFUSALS:**

CAHSAH will assess a \$25 fee for any check returned by the bank. CAHSAH will not process applications on credit cards declined by the bank, and you will be notified of the problem.

**CANCELLATION POLICY:**

Should an exhibitor need to cancel a space reservation, written notice of the cancellation is required. A cancellation causes substantial disruption in the assignment of booth space and in the planning of the show. A 50% administrative fee will be withheld from exhibitors who cancel on or before April 1, 2018. Exhibitors who cancel after April 1, 2018, will forfeit all fees and the right to occupy exhibit space.

**SUBMIT COMPLETED EXHIBITOR APPLICATION:**

MAIL: CAHSAH, 3780 Rosin Court, Suite 190, Sacramento, CA 95834

FAX: 916.641.5881

EMAIL: mlander@cahsah.org