applied psychophysiology & biofeedback

aapb

an international society for mind-body research, health care, and education

Exhibit Contract

37th Annual Meeting, April 6 - 9, 2006
Pre-Conference Workshops, April 5 - 6, 2006
The Hilton Portland and Executive Tower
Portland, Oregon

A: CONTACT INFORMATION: (This information will be printed in the Program)

Company: _____Authorized Officer: _____

Address: _____City:_____State: _____ Zip: _____

Telephone: _____ Fax: _____

E-Mail: _____ Website: _____

B: BOOTH REPRESENTATIVES

Please list name(s) of person(s) who will be responsible for staffing your exhibit area. The agreement includes registration for **two** representatives for each paid booth. Names must be submitted at the time of application.

1: _____

2: _____

Badges for additional sales representatives may be purchased in advance or on-site at Exhibitor Registration for $90 per person. These badges are for extra sales personnel only. This badge does not permit attendance to the sessions. Limit 2 per booth.

1: _____

2: _____

C: ADDITIONAL OPPORTUNITIES

☐ **Media Distribution** - AAPB will place your brochure or pamphlet in each attendee registration packet. Please distribute _____ item(s) in each attendee's packets. Cost per brochure, pamphlet, etc:
$250 AAPB members $300 non-AAPB members

☐ **Demonstration Session** - I want to reserve _____ demo(s). (Include the demo registration form with this contract.) These are 60-minute scheduled slots to demonstrate your company's products or services. Limited number of slots available on a first-come, first-served basis at $250 each. Limit: 2 per company.

☐ Please have someone contact me regarding sponsorship opportunities.

☐ **Promotion Option** - Check here if you will help promote the Meeting and deduct $100 in the fees section. AAPB invites you to help promote this Meeting to your customers. AAPB will prepare PR email messages. If you are willing to send the messages to your customers, AAPB will extend a $100 discount to your booth fee.

D: BOOTH FEE

	Before 12/15/05	2nd booth	After 12/15/05	2nd booth
AAPB Member	$1095	$545	$1400	$800
Non-Member	$1200	$745	$1650	$1050
Corporate Member	$945	$545	$1300	$800

AAPB reserves the right to assign space as necessary in the Meetings best interests. Every effort will be made to assign the exhibitor their first choice of locations or as near the first choice as possible. When two or more exhibitors ask for the same booth location, booths will be assigned in accordance with point rating date of receipt of payment and application.

We request _____Booth(s) at $ _____

Please list booth numbers: 1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

If our space selection is not available: ☐ We will accept AAPB's alternate placement. ☐ Contact us for a new choice.

E: FEES

Payment Method: ☐ Check ☐ Visa ☐ Master Card ☐ AE ☐ Discover

Exhibit Booths Total: $_____

Additional Exhibitors at $90 each: $_____

Media Distribution: $_____

Demonstration:

Before 1/21/06 - $250/$300: $_____

After 1/21/06 - $295/$300: $_____

Discount for Promotional Option: $_____

Total Enclosed: $_____

Credit Card #: _____

Exp. Date: _____/_____

Name of cardholder: _____

Signature: _____

F: AGREEMENT - With this application we agree to conform to the Exhibit Rules for the 2006 AAPB Annual Meeting, that are hereby made a part of this application. **Signature:** _____

Cancellation Policy - Cancellations must be in writing and postmarked by March 10, 2006 receive a full refund, minus a $100 processing fee. There will be no refunds for cancellations received after March 10, 2006.

Return this application with payment to: The Association for Applied Psychophysiology and Biofeedback; 10200 West 44th Avenue, Suite 304; Wheat Ridge, CO 80033-2840; Phone: (800) 477-8892 or (303) 422-8436 or **FAX: (303) 422-8894**