



## EXHIBITOR SPACE CONTRACT

**Instructions:**

- Complete and sign the Exhibitor Space Contract. \* Indicates required fields. Please print or type ALL the information.
- List the name and contact information of the exhibiting company as you want it to appear in promotional pieces.
- Make a copy of your completed Exhibitor Space Contract for your files.

**Exhibiting Company Information**

\*Company Name: (no acronyms)

\*Street Address/PO Box: \_\_\_\_\_

\*State: \_\_\_\_\_ \*Zip+4: \_\_\_\_\_ Country: \_\_\_\_\_

\*Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

\*E-mail: \_\_\_\_\_ \*www: \_\_\_\_\_

\*Logistics Contact Person: \_\_\_\_\_

\*Street Address/PO Box: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_ Country: \_\_\_\_\_

\*Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ \*E-mail: \_\_\_\_\_

**Product/Service Description**

Please print or type in 50 words or less (minimum of 10) your company’s product/service description in complete sentence(s) below. All or any part of the description will be used in the development of promotional pieces.

\_\_\_\_\_

**Payment**

One standard booth: \$900 or \$1,000 after March 1, 2018  
 Check Enclosed (Payable to National Cave and Karst Research Institute)  
 American Express  Visa  MasterCard  Discover

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Cardholder’s Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**Return signed contract along with payment to:**

National Cave and Karst Research Institute  
 Attn: Sinkhole Conference 2018  
 400-1 Cascades Avenue  
 Carlsbad, NM 88220-6215

**Agreement by Exhibitor**

I understand and agree to the following: This document becomes a binding Contract upon acceptance by the National Cave and Karst Research Institute (NCKRI) for the 15th Multidisciplinary Conference on Sinkholes and the Engineering and Environmental Impacts of Karst (“Sinkhole Conference”). I will be assigned one 8-ft long table and two chairs, and provided access to electrical power. I may install my exhibit only after the date and time listed in the conference schedule, and must remove the exhibit within 2 hours of the close of the conference. I will receive one full conference registration as part of this Exhibitor registration, excluding all optional registration items such as trips, short courses, etc. Additional exhibitors from my organization must register at the companionier registration rates. I will not hold NCKRI, its partners, the conference organizers, and/or sponsors responsible for loss or damages to any exhibit materials. My signature is acceptance of these conditions as indicated within this Contract. This Contract will be returned to me and space will not be assigned if this Contract is not properly executed. I agree to accept the space assigned and can reject it within ten (10) days of the date of confirmation. By completing and signing this Contract, I agree that any photographs taken of me during the 15th Sinkhole Conference may be used by NCKRI for promotional and educational purposes. I agree that NCKRI may share my contact information with other organizations vital to producing the 15th Sinkhole Conference, such as any general service contractor, hotel, or other service providers. I agree to the terms and conditions of this Contract, and warrant that I have signatory authority on behalf of my organization to execute this binding Contract.

Signature (required) \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_