

ISM RM 2013 CONTRACT FOR EXHIBITION: PAGE 1 of 2

Page 24



Salt Lake City, Utah, USA
20-26 April 2013
*"Discovery, Innovation & Application —
Advancing MR for Improved Health"*

For ISM RM Use Only:

Date Received: _____
ID No.: _____
Order No.: _____
Total Points: _____

CONTRACT FOR EXHIBIT SPACE

Technical Exhibition Dates: 21-25 April 2013; Priority Placement Deadline: 30 November 2012

1. Exhibitor Publication Information: To be published in the ISM RM Guide to the Exhibition.

COMPANY	TELEPHONE	FAX
ADDRESS	TOLL-FREE TELEPHONE	Email Contact Address
CITY	STATE/PROVINCE	ZIP/POSTAL CODE
COUNTRY	WEBSITE	

2. Mailing Address: All printed ISM RM exhibit-related materials will be mailed to the Official Representative at this address.

COMPANY
ADDRESS (No P.O. Box)
CITY
STATE/PROVINCE
ZIP/POSTAL CODE
COUNTRY

3. Representative Information: The Official Representative will receive all printed ISM RM exhibit-related materials (i.e. invoice). Both Representatives will receive all emails.

(1)	OFFICIAL REPRESENTATIVE	TITLE	TELEPHONE (if different from above)	E-MAIL ADDRESS
(2)	ADDITIONAL REPRESENTATIVE	TITLE	TELEPHONE (if different from above)	E-MAIL ADDRESS

We will be emailing updates frequently. Please clearly list the additional email addresses of those you wish to include on the 2013 Exhibitor list serve:

E-MAIL ADDRESS	E-MAIL ADDRESS
E-MAIL ADDRESS	E-MAIL ADDRESS

4. Booth Preferences: The following information will be used only as a guideline in assigning your exhibit space.

Indicate preferred booth number(s):

(Please note these are not final booth numbers)

1) _____
2) _____
3) _____
4) _____

We do not wish to be located near the following companies:

1) _____
2) _____
3) _____
4) _____

Please send completed contract with full payment to:
Melisa at melisa@ismrm.org, or fax to +1 510 841 2340.

COMPANY NAME _____

Page 25

5. Booth Order:**Standard rate = US\$345.00/sq.m. | Publisher rate* = US\$280.00/sq. m.**

*To qualify for the publisher rate, the company's primary business must be publishing printed and/or electronic journals, books, and/or magazines.

a) In-line Exhibit: _____ X _____ m. x ☐ USD\$345 or ☐ USD\$280 = US\$ _____
(A minimum order of 3 m x 3 m is required)b) Peninsula Exhibit: _____ X _____ m. x ☐ USD\$345 or ☐ US\$280 = USD\$ _____
(A minimum order of 3 m x 6 m required. Two corners required)c) Island Exhibit: _____ X _____ m. x ☐ USD\$345 or ☐ US\$280 = USD\$ _____
(A minimum order of 6 m x 6 m required. Four corners required)

d) Number of corners requested (granted on first come first served basis): _____ corner(s) x USD\$200.00 = USD\$ _____

Please include WiFi cost of USD\$150.00

Total Space Rental Plus WiFi USD\$ _____**6. Support Opportunities-Stand Out In the Crowd:****Corporate Member Level Packages:**If you are interested in Gold, Silver, Bronze or Associate Levels of ISMRM Membership, please check here and you will be contacted: ☐**7. Payment Information:** Check, charge, or wire transfers accepted (please contact the ISMRM office for wire transfer instructions)**Check** (in US\$ only): Make checks payable to: **International Society for Magnetic Resonance in Medicine** or **ISMRM****Payment: 100% payment** (full payment due 30 November 2012) = USD\$ _____**Credit Card:** Please charge fees to my ☐ Visa ☐ MasterCard ☐ AMEXCard Number _____ / _____
Expiration Date

Cardholder Name _____

Billing Street Address _____

City _____ State/Province _____

Zip Code/Postal code _____ Country _____

Payment amount US\$ _____

Signature _____

8. Terms of Agreement: Exhibitor agrees to abide by the 2013 Exhibitor Rules and Regulations published in the Exhibitor Prospectus and on the ISMRM web site, which are made a part of this contract by reference and fully incorporated herein. Exhibitor agrees that this contract is subject to the terms and conditions of the 2013 lease agreement for exhibit space between the Salt Palace Convention Center and the ISMRM.**Please note that contracts received without full payment will not be processed until such time when full payment is received.** This Contract will be considered complete only when the following are received by 30 November 2012 by the ISMRM:

- a) **Full Payment:** ☐ Included here or ☐ Will be sent by 30 November 2012
- b) **Description of materials to be displayed:** ☐ Included here or ☐ Will be sent by 30 November 2012
- c) **Company Profile for Guide to the Exhibition:** ☐ Included here or ☐ Will be sent by 1 February 2013
- d) **Floor Plan (if booth exceeds 9 sq. meters):** ☐ Included here or ☐ Will be sent by 8 February 2013
- e) **Proof of Insurance:** ☐ Included here or ☐ Will be sent by 22 February 2013

The undersigned shall have the authority to act on behalf of the Exhibiting Company in all negotiations:

SIGNATURE OF OFFICIAL REPRESENTATIVE _____

DATE _____