EXHIBIT SPACE and SPONSORSHIP APPLICATION/CONTRACT
47th ANNUAL NATIONAL CONFERENCE ON RADIATION CONTROL
May 18 – 21, 2015
St. Louis City Center Hotel ⚫ St. Louis, Missouri

Please Print or Type

<table>
<thead>
<tr>
<th>Your company information as you want it to be listed</th>
<th>Name Badge &amp; Individual Exhibitor Information</th>
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</thead>
<tbody>
<tr>
<td>Company Name:</td>
<td>Exhibitor #1:</td>
</tr>
<tr>
<td>Street Address:</td>
<td>Email address:</td>
</tr>
<tr>
<td>City, State, Zip:</td>
<td>Exhibitor #2:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Email address:</td>
</tr>
<tr>
<td>Fax:</td>
<td>Exhibitor #3:</td>
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<tr>
<td>Web site:</td>
<td>Email address:</td>
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**Note:** Included in the program will be your company information (name, address, telephone and fax number, as well as your logo) and each exhibitor’s name*. Included on the attendees list will be each exhibitor’s name, the company name, address, telephone, fax number, and the individual’s email address. Our web site will list the company name, address, phone, fax, and web site, and we will hyperlink to your web site. *If we have the information when the program is sent to the printer.

Be sure to provide your company profile and logo electronically to ssmith@crcpd.org no later than April 10, 2015 for inclusion in the program.

All exhibitors must register for the Conference. Entering exhibitor names above constitutes registering them for the Conference. The exhibit fee includes two complimentary registrations for the National Conference, the Chairperson’s Reception, and the Night Out. An additional $350 is required for each additional person. **All exhibit personnel are required to display their name badge at all times.**

This application for exhibit space at the 47th Annual National Conference on Radiation Control will become a contract with CRCPD upon receipt of the signed contract and payment. This contract is based upon the terms set forth below, including the exhibit floor plan and rates.

1. **Exhibit Space Rental:** The rental fee for each booth space is **$1,250** and includes a sign, pipe and draping, a draped eight-foot table, two chairs, one wastebasket, a 120-volt duplex outlet, and registration for **two** persons to the National Conference, the Chairperson’s Reception, the Night Out, and after hours security. The exhibitor is responsible for all other costs associated with the booth.

2. **Payment Terms:** A check for the full amount or credit card information must accompany a signed application - contract. Payment will be processed upon receipt.

3. **Cancellation Policy:** Non-refundable payment for the full amount by check or credit card information must accompany a signed application.

4. **Preferred Location:** Indicate your choice of booth locations from the attached floor plan. Every effort will be made to comply with your requested exhibit space, but CRCPD reserves the right to assign each booth space. Exhibit space is assigned as applications based on “first come – first served” paid application. When making your selection, please specify if you want to be placed to next to a specific exhibitor, i.e., in the next booth or across the aisle.

   First Choice _____ Second Choice _____ Third Choice_______

5. **Companies You Would Like to be Near:**

   ________________________________________________________________

6. **Companies You Do Not Want to be Near:**

   ________________________________________________________________

7. **Set-up:** Monday, May 18th, 11:00 a.m. – 2:00 p.m.

8. **Exhibit Hours:**
   
   Monday, May 18th: 3:00 p.m. – 5:00 p.m.
   Tuesday, May 19th: 9:00 a.m. – 4:50 p.m.
   Wednesday, May 20th: 9:00 a.m. – 4:05 p.m.

   All related equipment, crates, trash, etc., must be removed from the premises by 6:00 P.M. on May 20, 2015. (Over)
9. **Taxes and Licenses**: Exhibitor shall be responsible for obtaining any licenses, permits, or approvals required under local or state law applicable to their exhibiting at the 47th Annual National Conference on Radiation Control. Exhibitor shall be responsible for obtaining any tax identification numbers and paying all taxes, license fees, or other charges that are due to any governmental authority in connection with exhibitor's activities.

10. **Liability and Insurance**: Even though CRCPD will provide after-hours security and take reasonable precautions to safeguard the exhibitor’s property; CRCPD will not be liable for loss or damage to property of the exhibitor or his/her representatives or employees from theft, fire, accident, or other cause beyond its control. Exhibitors are advised to insure themselves at their own expense against property loss or damage, and liability for personal injury. CRCPD's liability for injury to persons or loss or damage to property shall be limited to liability as may be caused by its negligence. The exhibitor shall indemnify the CRCPD against, and hold harmless from, negligence of the exhibitor or in connection with exhibitor's use of display space.

The exhibitor assumes the entire responsibility and liability for losses, damages, and claims arising out of exhibitor’s activities on the Hotel premises and will indemnify, defend, and hold harmless the Hotel, the Hotel's agents, and employees from any and all such losses, damages, and claims.

The Hotel will not be responsible or liable for any loss, damage or claims arising out of exhibitor’s activities on the Hotel premises except any claims, loss, or damages arising directly from its negligence.

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**Vendor Sponsorship:**

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<th>Amount contributed</th>
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<td>Exhibit space*: $1,250 ea. x ____</td>
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*Contributions of $5,000 or more, exhibit package is complimentary.

- Additional exhibitor(s) @ $350 ea. ____
- ____ Guests - Chairperson’s Reception @ $40 ea. ____
- ____ Guests - Night Out @ $70 ea. ____

**Grand Total:** $ ____

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**Payment Information**

- Check
- Credit Card

Type:  
- Visa  
- MasterCard  
- American Express

Card #: ____________________________
Expiration Date: _______ 3-4 digit Security Code: _______

Name on Card: ____________________________

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**Financial questions/submit payment to:**

Amy Popp, CRCPD
1030 Burlington Lane, Suite 4B
Frankfort, KY 40601
Phone: 502/227-4543, Ext. 2225
Fax: 502/227-7862
Email: apopp@crcpd.org

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**For information other than financial, please contact:**

Sue Smith, CRCPD
1030 Burlington Lane, Suite 4B
Frankfort, KY 40601
Phone: 502/227-4543, Ext. 2228
Fax: 502/227-7862
Email: ssmith@crcpd.org

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FED Tax ID# # 71-0477513
DUNS # # 11-596-3720

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Conference of Radiation Control Program Directors, Inc. (CRCPD)
A Partnership Dedicated to Radiation Protection
www.crcpd.org