

SLA 2006 Annual Conference
• June 11 – 14 • Baltimore, MD USA •
Baltimore Convention Center

EXHIBITOR AGREEMENT FOR INFO-EXPO:
SLA INFORMATION PARTNERS

Company Name		Date
Address (No P.O. Box)		
City/State or Province/Postal Code		
Telephone	Fax No.	
Web Address		
Contact Person	Telephone	E-mail
Booth Size:	Number of Booths:	Table Top: YES / NO
Please select your booth location preference: <small>(For booth sizes, locations and fees please see Exhibitor Guide or the conference Website. Please do not select booths in the same general location)</small>		
1 st Choice:	2 nd Choice:	3 rd Choice:
4 th Choice:		
We prefer that our booth not be adjacent to or facing the following probable exhibiting companies: <small>(SLA will try to comply with such requests as much as possible)</small>		

On behalf of the above named exhibitor ("Exhibitor"), I, an authorized representative, hereby agree to rent the exhibit booth space specified above from the Special Libraries Association ("SLA") at the 2006 Annual Conference of the Special Libraries Association, Baltimore Convention Center ("Exhibition Facility"), Baltimore, MD, USA to be held June 11 - 13, 2006 (the "Exhibition") under the terms and conditions of this agreement and the 2006 Exhibitor Guide which contains the SLA General Rules and Regulations For Exhibitors (collectively, the "Exhibitor Agreement").

All Information and Full Payment Must Be Provided In Order to Process	
MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> AMEX <input type="checkbox"/> Diner's <input type="checkbox"/> Check # <input style="width:50px;" type="text"/>	Amount <input style="width:80px;" type="text"/> <input type="checkbox"/> 50% Deposit <input type="checkbox"/> Full Payment
Card # _____	Exp. Date _____
Security Code (CIN) _____	
Name on Card _____	
Billing Address _____	
Make Checks Payable in U.S. Dollars to SLA Send to: SLA Attn: Exhibits 331 South Patrick Street Alexandria, VA 22314 Fax: 1-703-647-4901	

The undersigned represents and warrants that he/she is over the age of 18 and duly authorized by all necessary and appropriate action to execute this Exhibitor Agreement on behalf of the Exhibitor.

Print Name _____ Title _____

Authorized Signature _____ Date _____

Note: All Exhibitor obligations, including payment, are binding upon signing. SLA reserves the right not to assign and/or hold booths for any or no reason whatsoever, and to only process with full payment

FOR OFFICE USE ONLY	Date Received _____	Initials _____
	Date Accepted _____	Initials _____
	Deposit _____	Full Amount _____
	Booth space assigned to _____	