

**Western Symposium on Rehabilitation and Deafness
Partners in Progress
2003 Conference
EXHIBIT CONTRACT**

This Exhibit Contract is made by and between Western Symposium on Rehabilitation and Deafness and _____ (“Exhibitor”). Contract must be returned no later than March 25, 2003. Terms of this agreement are as follows:

1. Exhibitor Rental Rates and Terms of Payment:

(All fees must be paid-in-full upon submission of this signed contract. P.O.’s/credit cards not accepted.)

	<u>Base Price</u>	<u>Electricity</u>	<u>VCR/Monitor Package</u>
Exhibit Booth	\$200.00	\$50	\$300.00

*** Electricity includes power strip and outlet for 2 days*

***VCR/Monitor includes VCR, Monitor, Outlet, and Power Strip for 2 days*

2. Demonstration Area

As an added bonus, there are 14 demonstration time slots available to demonstrate technical equipment to the conference attendees. Time slots are 90 minutes in length. There are six available on April 9, 2003 and eight on April 10, 2003.

3. Exhibit Facility

- Each 8’ x10’ area includes a 6’ table with linen, two (2) chairs, up to two (2) name badges for the exhibit area only, one (1) table identification tag, (1) conference program book.
- Location: Olympic Room, Seattle Center 354 – 1st Avenue N, Seattle WA

4. Exhibit Dates/Schedule:

Booth Set Up	Wednesday	April 9, 2003	8am - 10am
Exhibits Open	Wednesday	April 9, 2003	10am – 5pm
	Thursday	April 10, 2003	8am – 4:30pm
Booth Tear Down	Thursday	April 10, 2003	4:30pm – 5:30pm

5. Exhibitor’s Representative:

The Exhibitor will name one individual as its duly authorized representative, to have charge of the exhibit and hereby accepts and assumes responsibility for such representative being in attendance at its exhibit throughout the exhibit periods (referred to in #4 above). This individual will be responsible for the installation, operation and removal of the exhibit. Said representative shall be authorized to enter such service contracts as may be necessary, for which the Exhibiting agency shall be responsible.

6. Cancellation Policy:

Should an Exhibitor wish to cancel this contract, the refund schedule is as follows: 1) Written notification of cancellation of contract *on or before* March 31, 2003, no later than 5:00 p.m. – refund of 50% of total contracted costs; 2) Written notification of cancellation of contract *after* 5:00 p.m. on March 31, 2003 – Western Symposium on Rehabilitation and Deafness retains 100% of contracted costs; 3) Exhibitor fails to occupy the space – Western Symposium on Rehabilitation and Deafness retains 100% of contracted costs.

Note: Exhibitor contracts are not considered canceled unless the Western Symposium on Rehabilitation and Deafness Exhibit Chair has received notice in writing. Written notifications can be mailed, but note that postmarks are NOT accepted (date applies to ‘date received’). Written notifications may also be faxed to the Western Symposium on Rehabilitation and Deafness Exhibit Chair. No exceptions.

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7. Non-discrimination:

The Exhibitor represents and warrants that it is an equal opportunity organization and that it does not discriminate employment services, facilities or accommodation on the basis of race, gender, religion, age, ancestry, national origin, physical disability, personal appearance, sexual orientation, marital status, or any other basis prohibited by applicable law.

8. Liability & Insurance:

Western Symposium on Rehabilitation and Deafness will take reasonable precautions to safeguard the Exhibitor's property; however, the Exhibitor understands that neither Western Symposium on Rehabilitation and Deafness nor the Seattle Center maintains insurance covering the Exhibitor's property or lost revenue and it is the sole responsibility of the Exhibitor to obtain such insurance. Western Symposium on Rehabilitation and Deafness and Seattle Center does not assume any obligation or duty with respect to protection of the property of exhibitors, which shall at all times be the sole responsibility of each Exhibitor.

9. Hold Harmless Clause:

The Exhibitor assumes responsibility and liability for losses, damages and claims arising out of injury to person/s or damages to the Exhibitor's displays, equipment, and other property brought upon the premises of the Seattle Center: and agrees to indemnify, defend, and hold harmless. Western Symposium on Rehabilitation and Deafness, the Seattle Center, and its owners, servants, agents, and employees against all claims or expenses for such losses, including reasonable attorney's fees, arising out of the use of the premises excluding any liability caused by the negligence of Western Symposium on Rehabilitation and Deafness or the Seattle Center or its owners, servants, agents, and employees.

EXHIBITOR INFORMATION (please print)

Organization Name: _____

Contact Person: _____

Exhibit Representative (ref. #5): _____

Mailing Address: _____

Day Phone: V () _____ TTY () _____ FAX () _____

Exhibiting Product: _____

Exhibitor Nametags (2): Print names exactly as you wish them to appear on the nametags.

Please **print** the following exactly as you wish it to appear on the exhibit booth identification sign:

Organization Name: _____

City/State: _____

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The undersigned has read and agreed to the above exhibit regulations and understands that these regulations are incorporated into this contract by reference and further understands that these regulations become a contract when accepted and confirmed by the Western Symposium on Rehabilitation and Deafness Exhibit Chair.

Signature/Representative in Charge: _____ Date: _____

Printed Name and Title: _____

Check appropriate lines

Exhibit Area _____

Exhibit Brochure Table _____

Brochures only.

Note: We will contact you with this information, including pricing, upon receipt of your contract.

Demonstration Area _____

For a demonstration of my product I will need the following

Note: once we receive your request we will contact you to work out the details. While we cannot promise to provide everything you need, we will make every attempt to provide an atmosphere where your demonstration can be successful.

Payment	
Exhibit Booth Base.....	\$ _____
Electricity.....	\$ _____
VCR/Monitor Package	\$ _____

Total.....\$ _____

Please make check payable to: GURC at Ohlone College

You may fax all three signed contract pages to GURC at 510/659-6009.

Please mail *both* the check, all three pages of the signed contract no later than **March 25, 2003**, to:

Gallaudet University Regional Center
Ohlone College
43600 Mission Blvd.
Fremont, CA 94539

Office Use Only:		
Date Contact Rec'd	Amt. Rec'd	Check #
Date Confirmation Sent	Space/Booth #	

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