CLARINETFEST® 2020 EXHIBITOR SPACE RESERVATION FORM & AGREEMENT

By signing and returning this *Exhibitor Space Reservation Form and Agreement*, the exhibitor acknowledges that he/she/they, as legal representative of the company named below, has read, understands, and agrees to accept and abide by all conditions and regulations in the document entitled *Exhibitor Information and Regulations* for this conference. **Please make reservations by April 15, 2020**.

Please make a copy of this form for your records.

More information about ClarinetFest® 2020 available at clarinet.org/clarinetfest

 EXHIBITOR INFORMATION	Please provide the names of your anticipated company	
	representatives for Exhibitor Badges. Total of four names per 8'x 8' booth space. Please use addit	iona
Mailing Address	page if needed.	ionai
	1	
T. I	2	
Telephone #	3	
Mobile phone #	4	
Fax #	• <u>BOOTH LOCATION</u> •	
Email Address	See exhibitor floor plans and indicate first second and thi choices for booth location, plus any preferences or special	
Website	requests. Location choices are not guaranteed and will be	;
• EXHIBITOR CONTACT • (for exhibits coordination)	assigned on a first-come, first-served basis, with preferen given to previous supporting sponsors and exhibitors.	ce
Contact Person	1 2 3	
Telephone #	Special requests/notes:	
Mobile phone #		
Fax #		
Email Address	• PAYMENT OPTIONS • Payment in full must	
SIGNATURE (required)	accompany exhibit space reservation.	
	TOTAL AMOUNT DUE \$	
• EXHIBITOR SPACE & RATES • Each 8' x 8' space includes one 6' draped table, two chairs, a wastebasket and ID	• <u>PAYMENT METHOD</u> • Make payable to: International Clarinet Associat	: a
sign. Exhibitors are welcome to bring their own signage and/or banners. Wireless	Check or money order in U.S. funds	1011
Internet access included. Space is limited . Check booth size requested below:	☐ Please charge my credit card \$	
Single Booth (8' x 8') - \$500 (USD)	(Visa, MasterCard, American Express)	
☐ Double Booth (8' x 16') - \$900 (USD) ☐ Triple Booth (8' x 24') - \$1,275 (USD)	Card #	
2 Triple Booth (6 1/21) \$1,275 (655)	Expiration DateCVV	
• PRODUCT/SERVICE DESCRIPTION •	Name on Card	
For publication in the conference program book, please include a statement of 25 words or less describing the products and/or services provided by your company	Billing Address	—
provides. The ICA reserves the right to edit program copy.		
	Signature	
	Please return completed form	
	and payment no later than April 15, 2020 to:	
	International Clarinet Association	
	829 Rethel Road #216	

International Clarinet Associatio 829 Bethel Road, #216 Columbus, OH 43214 USA Email: EDO@clarinet.org