2014 PARMA Conference Exhibit Booth Contract

February 9-12, 2014, San Jose Convention Center

All booths come with two conference registrations. Booths are reserved on a first in, first assigned basis and payment in full must be received before confirmation is sent out. This is your contract for the booth ONLY. You MUST still register your attendees on the PARMA website at www.parma.com under Events. Registration will be available by August 15 for your attendees.

	Exhibiting company infor	mation: (will appear	as entered through	out the conference)	
Company Name:		URL:			
Booth Contact:Title:					
Address:					
Phone		Fax			
	Company Description - Please	email your 50 wo	rd company profil	e to: <u>exhibit@parm</u>	na.com.
	Company classification	on for conference o	ogram - please ched	ck all that apply:	
Claims Administr		Dental/Vision			e
Insurance				Managed C	
Rehabilitation		Software	☐ TPA	☐ Workers' C	Compensation
Other (please spe	ecify)				
Exhibit Booth Preferer	nce: Ist: 2nd:	3rd:	Are you givin	g away a prize at you	r booth?
	n requests:			. , , ,	- -
List any booth locatio	<u> </u>	_			
Contract Signature (R	equired):				
	i/REGULATIONS AND ALL UNI	ON RULES/REGUL	ATIONS ARE AGRE	ED TO BE A PART O	OF THIS CONTRACT
		itor Fees and Pay			
	Exhibit booth space	e will not be rese	rved until payme	nt is received.	
Booth Fees - Premium	n Booths are all booths denoted	with a star on the e	xhibitor floor plan.		
Member Pricing:					
Standard Booth:	\$1800 (before 12/01/13)	\$2000 (12/01/13	and after)	<u>x</u>	=\$
Premium Booth:	\$2000 (before 12/01/13)	\$2200 (12/01/13	,	x	=\$
Non-Member Pricing					
Standard Booth:	\$2350 (before 12/01/13)	\$2550 (12/01/13	and after)	x	=\$
Premium Booth:	\$2550 (before 12/01/13)	\$2750 (12/01/13	and after)	x	=\$
				Total Due	=\$
Payment - Checks Ar	merican Express, Discover Card,	Master Card and Viv	a accepted		
rayment - Cheeks, 74	By Credit			t in the amount of	\$
Cradit Card Number	:			Evpirati	on Date:
	le postal code):				
`					
oignature.		-			
	☐ By Check	, •	Check Number:_	in the	amount of \$

Questions - contact Brenda Johnson at (888)907-2762 x548
Submit signed Exhibitor Contract with Payment (check/credit card) to:
PARMA - P.O. Box 711060 - Santee, CA 92072-1060 / fax: (209) 832-6964 / Email: exhibit@parma.com