



SOUTH DAKOTA NURSES ASSOCIATION ANNUAL CONVENTION
October 3-4, 2010
Ramada
Mitchell, South Dakota

EXHIBITOR CONTRACT

Exhibit Space Agreement - The Exhibitor agrees to pay South Dakota Nurses Association for each exhibit space requested. Your payment is required with your completed contract. Exhibit booth includes one, 6' skirted table / two chairs / wastebasket. *Exhibitor commits to maintain booth space during convention hours on Sunday, October 3, 2010 and on Monday, October 4, 2010.*

Contact Person _____ Affiliation _____

Address _____ City _____ State _____ Zip _____

Phone(____) _____ Fax (____) _____ E-mail address _____

Product/Service to be displayed: _____ Electrical Needs: No Yes

Door prize offered: No Yes Item: _____

Please indicate booth staff names here. (Convention registration not included)

1. _____ 2. _____

Booth fee: Prior to July 1st \$300.00 After July 1st \$350.00

If your exhibit provides product samples, the cost of the booth is \$150.00.

TOTAL DUE \$ _____ *Please make check payable to South Dakota Nurses Association- SDNA tax ID: 46-0229846*

Refund Policy - If written notice of cancellation is received on or before August 31, 2010, a refund will be made less a \$10.00 processing fee. No refunds will be made after August 31, 2010.

Hold Harmless Clause "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, its owner, and its management company, as well as their respective agents, servants, and employees from any and all such losses, damages, and claims"

Hotel will not be responsible or liable for any loss, damage or claims arising out of exhibitors activities on the hotels premises except for any claims, loss, or damage arising directly from the hotel's own negligence. South Dakota Nurses Association will be responsible to negotiate the contract with its exhibitors.

Due to the layout of the hotel, storage space is not available for display materials and/or show merchandise. At the conclusion of the set-up operation, all related equipment, crates, trash, etc. must be removed from the premises no later than the last day of the exhibit show period.

I have read the "hold harmless clause and refund policy. I agree to uphold the terms:

 Authorized Signature for exhibit booth contract

 Date

RETURN YOUR SIGNED CONTRACT AND FEE TO:
 SDNA PO Box 1015 Pierre, SD 57501
 Phone: 605.945.4265 Fax: 1.888.425.3032 Email: sdnurse@midco.net