

APPLICATION FOR EXHIBIT AND STATIC SPACE AT 2010 REGIONAL FORUMS

Company Name: _____ NBAA Member Number: _____ Contact Name: _____

Contact Title: _____ E-mail Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Name and Cell Number for On-Site Exhibit Manager: _____

Please reserve space at the following Business Aviation Regional Forums:

New for 2010! Sign up and pay in full by the deadline for all four 2010 Regional Forums and receive a \$50 discount per Forum (indoor space only).

10 ft by 10 ft	Static Display	10 ft by 10 ft	Static Display	10 ft by 10 ft	Static Display	10 ft by 10 ft	Static Display
Jan. 14/Houston, TX	<input type="checkbox"/>	Mar. 11/Van Nuys, CA	<input type="checkbox"/>	June 10/Teterboro, NJ	<input type="checkbox"/>	Aug. 18/Chicago, IL	<input type="checkbox"/>

NBAA will attempt to honor exhibit placement requests. Please list any special requests: _____

Static Exhibitors, please list aircraft types to be displayed: _____

PAYMENT INFORMATION

ALL EXHIBIT SPACE MUST BE PAID IN FULL WITH EXHIBIT APPLICATION. There will be no refunds for cancellations or reductions in size at any time.

Exhibitor Booth Fee: _____ 10ft by 10ft at \$1,850 each per Forum \$ _____

Static Display Space: _____ ft by _____ ft, which is
_____ 10ft by 10ft spaces at \$75 each per Forum (minimum of 16 spaces) \$ _____

If you are not an NBAA Member, please add \$415 for NBAA annual dues. \$ _____

Discount (we are registering for all four 2010 Forums; Discount = \$50 per Forum) \$ _____

Total : \$ _____

PAYMENT METHOD

Company checks and bank wire transfers are the preferred methods of payment for NBAA Regional Forums. Credit card payments are an accepted form of payment. Credit card payments received in excess of \$20,000, however, will be subject to a 3 percent processing fee.

Enclosed is a check in the amount of: \$ _____ Check Number: _____ MAKE CHECKS PAYABLE TO: **NATIONAL BUSINESS AVIATION ASSOCIATION, INC.**

Charge my credit card in the amount of: \$ _____ Cardholder's Name: _____

Card Type: American Express MasterCard Visa Discover

CREDIT CARD NUMBER

EXPIRATION DATE

SIGNATURE (FOR CREDIT CARD)

TERMS

In signing this application/contract, Exhibitor assumes entire responsibility and hereby agrees to protect, indemnify defend and hold harmless the National Business Aviation Association and its respective officers, employees, Members and agents from and against all claims, losses, injuries and damages to persons or property, governmental charges or fines and attorney's fees arising out of or caused by Exhibitor's installation, removal, maintenance, occupancy or use of the exhibition premises, or any part thereof, or arising out of or caused by Exhibitor's participation in exhibition activities. Signature below indicates acceptance of the above terms.

Signature: _____ Date: _____

For questions or additional information, contact NBAA's Joe Hart at jhart@nbaa.org.

Return completed application via fax to (202) 737-4486 or mail/overnight to: NBAA Regional Forums, 1200 18th Street NW, Suite 400, Washington, DC, 20036