



**CHADD Tabletop Exhibitor &/or Advertiser Application and Contract**  
**Education Conference on Attention Deficit/Hyperactivity Disorder**  
**Anaheim, California – August 22, 2009**

**I. Please type or print clearly**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

**Deadline: Applications must be returned by August 7, 2009 to assure exhibit space and your organization name listed in the Conference Program Brochure. While applications will be accepted after this date, ad space cannot be reserved, and your organization will not be listed in the program book.**

**10% total Discount for reserving both Tabletop Exhibit and Advertising Space.**

**II. Exhibit Booth Registration**

- a.) Not for Profit Organization\* \$425: Total Due: \_\_\_\_\_
- For Profit Organization \$500: Total Due: \_\_\_\_\_
- Take-One Exhibit Area \$200: Total Due: \_\_\_\_\_

**III. Advertising**

- a.) Full Page Ad, b&w - \$500: Total Due: \_\_\_\_\_
- b.) 1/2 Page Ad, b&w - \$275: Total Due: \_\_\_\_\_
- c.) 1/4 Page Ad, b&w - \$150: Total Due: \_\_\_\_\_ (Free if booth space is reserved by Aug. 7, 2009)

**Ad Specifications:**

Full Page: 7 3/4" x 10"  
 1/2 page horizontal: 7 3/4" x 4 7/8"  
 1/4 page: 3 5/8" x 4 7/8"

**Please email your camera-ready ad in a high res print pdf at 300 dpi, with crops and bleed, to Suzanne\_Urie@chadd.org by, or before August 7, 2009. Payment in full is due by August 7, 2009.**

**Grand Total: \$ \_\_\_\_\_**

**IV. Payment Method – (All funds received must be in U.S. dollars.)**

- Check enclosed (payable to CHADD)
- Money Order
- VISA
- MasterCard
- American Express
- Discover

Print name as it appears on card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**V. Acceptance of Contract\*\*:**

Applications for exhibits are subject to review. CHADD continues to reserve the right, at its sole discretion, to accept or reject requests for exhibit space at the CHADD Regional Conference.

**\*Not-for-profit organization, please provide proof of non-profit-status.**

**\*\*First-time exhibitors, please include a sample brochure or descriptive literature on your products or services with your application.**

**Please forward signed CHADD Tabletop Exhibitor &/or Advertiser Application and Contract along with payment to:**

**Suzanne Urie, Exhibits & Conference Advertising Manager**  
**CHADD**

**8181 Professional Place, Suite 150**  
**Landover, MD 20785**

**Or fax to: 301-306-7090, Attention: Suzanne Urie, Exhibits & Conference Advertising Manager**

\_\_\_\_\_  
Authorized Representative & Title  
(Please Print)

\_\_\_\_\_  
Authorized Representative Signature  
Please make a copy for your records

\_\_\_\_\_  
Date