

EXHIBITOR SPACE APPLICATION/ CONTRACT

2018 SAFETY+ SYMPOSIUM Gaylord Opryland Convention Center in Nashville, Tennessee

INSTRUCTIONS

Complete and sign the Exhibitor Space Application/Contract.

**Indicates required fields. Please print or type ALL information.*

- See the 2018 Rules and Regulations at www.vpppa.org for additional information.
- Be sure an authorized company representative signs the Exhibitor Space Application/Contract.
- Indicate order of booth preference using the VPPPA Expo 2018 floor plan on page 3. Please check www.vpppa.org for an up-to-date floor plan.
- List the name and contact information of the exhibiting company as you want it to appear in promotional pieces.
- Submit your completed Exhibitor Space Application/Contract and full payment by the deadline dates indicated to receive the respective rates.
- Payment may be made by check (payable to VPPPA, Inc.) or by credit card.

RETURN EXHIBITOR SPACE APPLICATION/CONTRACT TO VPPPA

Attn: VPPPA Expo
7600-E Leesburg Pike, Suite 100
Falls Church, VA 22043-2004

Fax: (703) 761-1148
Email: Expo@vpppa.org

www.vpppa.org
2018 VPPPA Exhibitor Prospectus

EXHIBITING COMPANY INFORMATION—Indicate the company information as you want it to appear in VPPPA publications, the conference mobile app and promotional materials.

* COMPANY NAME _____		VPPPA MEMBER ID # _____
* STREET ADDRESS/P.O. BOX _____		
* CITY _____	* STATE _____	* ZIP _____
* COUNTRY _____		
* TELEPHONE _____	EXT. _____	
* WEBSITE _____	TWITTER HANDLE _____	
* HOW DID YOU HEAR ABOUT US? _____		

LOGISTICS CONTACT INFORMATION—Indicate the logistical contact and recipient of all exhibitor materials (e.g. Exhibitor Service Manual, attendee list, Exhibitor News)

* FIRST NAME _____	* LAST NAME _____
* TITLE _____	
* EMAIL _____	
* TELEPHONE _____	EXT. _____

BOOTH SELECTION ** Booth Placement Is Not Guaranteed.

Please list your booth space choices.**

First Choice _____

Second Choice _____

Third Choice _____

Total Square Feet _____

(See other side for rates.)

Exhibitors you want to be near to
(by company name):** _____

Exhibitors you want to be separated from
(by company name):** _____

SALES CONTACT INFORMATION—Indicate the sales contact as you want them to appear in VPPPA publications and promotional materials.

Check here if the sales contact is the same as the logistics contact.

* FIRST NAME _____	* LAST NAME _____
* TITLE _____	
* EMAIL _____	
* TELEPHONE _____	EXT. _____

MARKETING CONTACT INFORMATION—Indicate the contact person who handles all advertising, sponsorship and/or promotional decisions for your company.

Check here if the marketing contact is the same as the logistics contact.

* FIRST NAME _____	* LAST NAME _____
* TITLE _____	
* EMAIL _____	
* TELEPHONE _____	EXT. _____

***PRODUCT/SERVICE DESCRIPTION**

Please print or type, in complete sentences, and in 50 words or fewer (minimum of 10), your company product/service description. Any, or part, of the description will be used in the development of promotional pieces.

Use last year's product/service description.

PRODUCT SERVICE CATEGORIES

Please check no more than three for your product/service categories.

- Advertising Services
- AED Training
- Air Quality Equipment
- Apparel, Safety
- Association/Society
- Auto Safety
- Compliance Products/Services
- Computer Software
- Consulting Services
- Culture Assessment
- Defibrillators
- Embroidery
- Employee Development
- Environmental Management
- Ergonomic Products & Services
- Eyewashes
- Eyewear, Protective
- Fall Protection Systems
- First Aid & CPR
- Footwear Safety
- Forklift Safety
- Gas Detection
- Government Agency
- Grating Penetration Safety
- Hand Protection
- Hand Tool, Safety
- Hazardous Materials Control
- Hearing Loss Programs
- Hydration System
- Identification Products
- Incentives & Recognition
- Industrial Hygiene Services
- Industrial Services Contractor
- Instrumentation
- Lockout/Tagout Products
- Mail Service
- Medical Equipment
- Noise Monitoring
- Onsite Assessment
- Personal Protective Equipment
- Pocket Safety Cards
- Posters
- Production Safety Materials
- Professional Speaker
- Promotional Products
- Publications
- Respirator Fit Testing
- Risk Management Services
- Safety Interlocks
- Safety Personnel
- Safety Signage
- Skin Care Products
- Sorbents
- Spill Control
- Stand-by Rescue Teams
- Training, Emergency Response
- Training, Environmental Health
- Training, Ergonomics
- Training Materials
- Training, Safety
- VPP Application Assistance
- Wellness Programs
- Other _____

BOOTH & EXHIBITOR FEES

Every 10' x 10' booth includes 1 draped table, 2 chairs, waste basket and carpeting. Total Square Cost per sq. ft.

	Priority Period Until 10/13/17	Regular Until 3/19/18	Late After 3/19/18
Members	\$16.50/sq. ft.	\$17.50/sq. ft.	\$18.50/sq. ft.
Nonmembers	\$20.50/sq. ft.	\$21.50/sq. ft.	\$22.50/sq. ft.
Each Exposed Corner	\$150	\$150	\$150
Upgraded Exhibitor Listing*	\$500	\$500	\$500

Footage _____ x \$ _____ = _____

Attendee mailing addresses for nonmembers (\$500) = _____

Affiliate membership dues (\$500) = _____

Number of exposed corners _____ x \$150 = _____

Game Card Square (\$1,500) = _____

Upgraded Exhibitor Listing* (\$500) = _____

Total Payment = _____

*An upgraded exhibitor listing will highlight your company in the Upgraded Exhibitor section of the program as well as highlighting your listing in our mobile app and on our website to help you stand out among your competitors.

AFFILIATE MEMBERSHIP

If you are interested in becoming a VPPPA Affiliate member or renewing your membership for 2018 please check the appropriate box below. By joining as an Affiliate member, you are eligible to register at the member rate, receive access to pre- and post-conference attendee lists and much more. For more information about Affiliate member benefits, please contact the VPPPA Membership & Development Department at (703) 761-1146 or Membership@vpppa.org.

- Join as a VPPPA Affiliate member (\$500)
- Renew your VPPPA Affiliate membership for 2018 (\$500)

Access pre- and post-conference attendee mailing lists at the nonmember rate (\$500).

VPPPA is a nonprofit 501(c)(3) charitable organization. Membership dues are 100% tax deductible. VPPPA Federal Tax ID# 54-1598954.

METHOD OF PAYMENT

Please indicate your method of payment. Payment must accompany your Exhibitor Space Application/Contract.

Check # _____ (payable to VPPPA, Inc.)

Mail checks to: VPPPA, 7600-E Leesburg Pike, Suite 100, Falls Church, VA 22043

- VISA Master Card American Express
- Discover Diners Club

CARD #

EXP. DATE

NAME AS IT APPEARS ON CARD

CARDHOLDER'S SIGNATURE

DATE

The 2018 Rules and Regulations constitute part of this 2018 Exhibitor Space Application/Contract, which the exhibitor agrees to abide by and conform to. In witness whereof, the applicant has caused this Exhibitor Space Application/Contract to be signed by an officer of the company or person duly authorized. By completing and signing this Exhibitor Space Application/Contract, the exhibitor hereby releases any photographs or videos to VPPPA that may be incidentally taken of exhibitor booth personnel during Safety+ 2018 to be used for any purpose. The exhibitor agrees that VPPPA may share the exhibitor's information with other organizations vital in producing the Safety+ 2018, such as the general service contractor, Gaylord Opryland Convention Center, lead retrieval company and other service providers. For the full list of rules and regulations, please visit vpppa.org. Signing this form serves as consent that the official rules and regulations have been read and understood.

PRINT NAME

SIGNATURE

DATE