Application & Contract for Exhibit Space

ASBO International's Annual Meeting & Expo

October 13–14, 2012 ■ Phoenix, Arizona

am&e 2012 PHOENIX 10/12-15

Four Easy Steps—Apply Today!

1. Mail Correspondence to:

Contact Name (Booth Contact): _____

Title: _____

Contact Address: _____

Contact City: _____ State: _____ ZIP: _____

Contact Phone: _____ Contact Fax: _____

Contact Email: _____

Company Web Address: _____

2. Booth Selection:

Booth Choice (visit **www.asbointl.org** to view current floor plan):

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

4th Choice: _____ 5th Choice: _____ **Size of Booth:** _____

Do not assign near _____

Check here if first-time exhibitor

Please send me additional information on:

- ❑ Social Responsibility
- ❑ Sponsorship Information
- ❑ Corporate Membership
- ❑ Advertising

3. Rates/Payment:

Please Select One Only:

	BEFORE August 10, 2012	**AFTER** August 10, 2012
EXHIBITOR RATES ■ 10 x 10 inline booth ■ 4 Exhibit Hall Badges ■ Free Professional Development for your exhibitors ■ 2 Receptions	❑ **$1,850** 50% due with contract *OR* ❑ **$1,700** if paid in full with contract (savings of $150)	❑ **$1,850** Payment must be in Full
MEMBERSHIP PACKAGE (Includes 1 corporate membership & 10 x 10 booth)	❑ **$2,000** Payment must be in Full	

Amount Due: _____

Payment Method:

❑ CHECK (ASBO will accept U.S. funds drawn on U.S. banks only.)
Make checks payable to ASBO International

CREDIT CARD: (check one) ❑ Visa ❑ Mastercard ❑ American Express ❑ Discover

Credit Card Number _____

Exp. Date _____ CSV # *(3 digit # on back of card)* _____

Cardholder's Name *(print)* _____

Phone _____ Email _____

I, the undersigned, authorize the Association of School Business Officials International (ASBO) to charge my credit card for the amount listed on the Application & Contract for Exhibit Space.

Cardholder's Signature _____

For ASBO Use Only

ID Number _____

Date Received _____

Booth(s) Assigned _____

Booth Size/Dimensions _____

Total Booth Cost $ _____

Amount $ _____

Balance Due $ _____

Confirmation _____

ASBO Signature _____

Date _____

Return Signed Applications to:
ASBO International
11401 North Shore Drive
Reston, VA 20190-4200

mquigg@asbointl.org
Phone: 866.682.2729 x7075
Fax: 703.478.0205

4. Agreement:

I, the undersigned, hereby make application for exhibit space at ASBO International's Annual Meeting & Exposition. I am an authorized representative of the company with full power and authority to sign and deliver this Application. I acknowledge and agree that ASBO has the right to deny exhibit space for any reason. I hereby agree to the rules and regulations of exhibition with ASBO.

Authorized Printed Name _____ Authorized Signature Date _____

INVITE 12