

# EXHIBIT RESERVATION FORM

## EXHIBITOR INFORMATION (PLEASE PRINT)

CONTACT PERSON'S NAME \_\_\_\_\_ TITLE \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE \_\_\_\_\_

FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_ WEBSITE \_\_\_\_\_

*I have read and agree to abide by the rules and regulations governing the conference, which are listed on the following page.*

Authorizing signature \_\_\_\_\_

Yes, I will donate \_\_\_\_\_ [number] books for the AIA Graduate Student Paper Award. (Donors will be acknowledged in the AIA Program and online.)

## EXHIBIT SPACE APPLICATION

Space is assigned on a first-come, first-served basis. Spaces cannot be assigned until the exhibit application and deposit are received. Full payment is due by December 1, 2017.

Type of Exhibit Display	Quantity	Cost per unit	Total cost
Premium Exhibit Booth [deposit: \$500] (numbers: 100, 101, 200, 201, 202, 203, 300, 301, 302, 303, 400)	_____	\$1000	\$ _____
Preferred Exhibit Booth [deposit: \$450] (numbers: 205, 206, 208, 211, 304, 307, 309, 310)	_____	\$900	\$ _____
Exhibit Booth [deposit: \$425]	_____	\$850	\$ _____
Display Table [deposit: \$238]	_____	\$475	\$ _____
Combined Book Exhibit (first book) [full payment due at booking]	_____	\$150	\$ _____
<i>Each additional book</i>	_____	\$75	\$ _____
		<b>Total Exhibit Space Cost</b>	<b>\$ _____</b>
		<b>Deposit</b>	<b>\$ _____</b>
		<b>Balance Due</b>	<b>\$ _____</b>

### MORE PROMOTIONAL OPPORTUNITIES

Yes, I'm interested in learning more about the marketing/advertising opportunities below.

- Opening Night Reception
- Sponsored Food or Beverage Break
- Conference Lanyards
- Conference Tote Bags
- Hotel Room Keys Cards
- Joint Attendee Mailing List:
  - Pre-registrants
  - Final attendees

### SPACE SELECTION

Consult the floor plan on pg. 4 to determine your preferred booth space. Please write booth number(s) below.

1st choice \_\_\_\_\_ 2nd choice \_\_\_\_\_ 3rd choice \_\_\_\_\_ 4th choice \_\_\_\_\_

### PAYMENT METHOD AND AUTHORIZATION

All payments must be in U.S. dollars.

- VISA     MasterCard     Discover     American Express
- Check payable to AIA/SCS Annual Meeting enclosed

CARD NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ CVV# \_\_\_\_\_

CARDHOLDER'S NAME \_\_\_\_\_

CARDHOLDER'S SIGNATURE \_\_\_\_\_

Please fax, scan or mail form to: Kevin Mullen, Archaeological Institute of America,  
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