

## **2021 EXHIBITOR & SUPPORTER APPLICATION AND AGREEMENT**

COMPANY INFORMATION					
Applying as:					
Company Name (as displayed on printed materials)					
Pharmaceutical Company Pharm	macv	☐ Medical Device Co	ampany	☐ Other	
	Пасу	Medical Device Co	лпрапу	Other	
Description of Company					
A.A					
Activities/Purpose					
APPLICATION GUIDELINES & PAYMENT	POLICIES				
• All supporter applications require 100% paym	ient upon recei	pt of invoice			
<ul> <li>Companies wishing to cancel or reduce their booth space and/or support opportunities are required to submit a written request by August 6, 2021. Official cancellation date will be in effect the date written notification is received</li> </ul>					
• Full refunds will be provided for cancellations received on or before August 6. 100% of total fee will be retained for					
cancellations received on or after August 7					
<ul> <li>Support opportunities are non-exclusive and available on a first-come first-served basis</li> <li>Applications accepted on or after 5:00 p.m. on September 1 will incur an additional \$300 processing fee</li> </ul>					
Booth selection will be made in the order approximately a selection will be made in the order approximately a	•			е	
• If an application is not accepted, submitter w		•		ays of original	
submission date					
EXHIBITS					
Please indicate the number of individual 10' x 10' b	ooths desired (\$	5,500 each):	Total booth si	ze:	
I elect to have an exhibitor profile page on the 202	I NACFC Virtua	Platform:   Yes	] No 🔲 I want a	a Virtual Booth Only	
SUPPORTER LEVELS (Details listed in the F	rospectus)				
Please select your desired support level (if applicab					
				***	
Elite	,	Signature			
Prestige	,	Select		•	
Premier	•	Supporter		\$7,000	
Prime	\$50,000				



## **2021 EXHIBITOR & SUPPORTER APPLICATION AND AGREEMENT**

BOOTH PREFERENCE	See support opportunities in the NACFC 2021 Prospectus. Support opportunities are available on a first-come, first-served basis. Some opportunities have limited availability.		
Please indicate preferred booth location in order of priority			
phoney	avanable on a mist-come, mist-served basis. So	ane opportunities have innited availability.	
1) Choice	1) Item		
2) Choice	2) Item		
z) Choice	z) item		
3) Choice	3) Item		
4) Choice	4) Item		
4) Choice	4) item		
5) Choice	5) Item		
COMPANY CONTACT INFORMATION			
Company Name			
Contact	Title		
Address:			
City	State	Postal Code	
Country			
Email			
C WI :			
Company Website			
Phone	Fax		
Out the Country to			
Onsite Contact			
Email			

## Submit your payments online

Visit the Exhibitors and Supporters tab on our website https://www.nacfconference.org/Payment.aspx



## 2021 EXHIBITOR & SUPPORTER APPLICATION AND AGREEMENT

WILL YOU BE USING A THIRD-PARTY MEETINGS MANAGEMENT COMPANY?			
Yes No  yes, please provide third-party contact information and authorization with this application.			
ACCEPTANCE			
Application is hereby made for non-educational support at NACFC 2021. Please read carefully and check the corresponding boxes to indicate agreement of the following:			
I am an authorized representative of the company named above with full authority to sign and deliver this application.  The company listed on this application agrees to comply with the guidelines in the Prospectus, and the rules and regulations applicable for exhibitors and supporters at NACFC 2021			
I understand that my application will not be considered complete until/unless all sections of this application are filled and 100% payment is received			
I understand my signature below commits my company to the booth space and/or support opportunities requested in this application. If I wish to reduce my booth commitment or support after this application is submitted, I will refer to the application guidelines and payment policies detailed herein			
I understand that all correspondence will be with the contact listed on page 2 of this application. I agree that this contact will be responsible for communications to all personnel from the same exhibiting and/or supporting company, and forwarding all materials to agents and/or representatives employed by the company			
Should this application be accepted, I understand that a confirmation and invoice will be sent by NACFC Show Management via email, upon which 100% payment is to be remitted			
I understand that all terms of this application are considered an agreement unless otherwise notified by NACFC Show Management			
I agree to adhere to the exhibitor and supporter timeline detailed in the Prospectus as appropriate. I understand that failure to adhere to submission deadlines will result in forfeiture of booth space and/or support opportunities			
The CFF is committed to ensuring that it is free from undue Industry influence and avoiding potential conflicts of interest. I understand that I must abide by the NACFC Exhibitor & Supporter Rules and Regulations			
I understand that all matters and questions not specifically covered by the guidelines in the Prospectus, and the Exhibitor & Supporter Rules and Regulations are subject to the decision of the CFF and NACFC			
uthorized Signature Date			

Please return this form to

Rebekah Kim Meeting Planner and Exhibit Specialist

Email: Exhibit-Support-NACFC@cff.org