

APPLICATION & CONTRACT FOR EXHIBIT SPACE

Maine Funeral Directors Association 38 Young Avenue Brunswick, Maine 04011 207-729-9100 /
(207) 729-0143 - FAX / e-mail: sallybelanger@aol.com

In accordance with the Rules and Regulations Governing Exhibits, which are a part of this contract, the undersigned (hereinafter referred to as "exhibitor") hereby applies for exhibit space as indicated below for use in the 2008 MFDA (Maine Funeral Directors Association's) Convention & Exhibition to be held Tuesday & Wednesday, December 2-3, 2008 at the South Portland Marriott Hotel at Sable Oaks, 200 Sable Oaks Drive, South Portland, Maine 04106.

The exhibitor has studied the official exposition diagram (copy attached) and designates (4) different choices of exhibit space in the order of our preference as follows:

first choice is space number: _____

second choice is space number: _____

third choice is space number: _____

fourth choice is space number: _____

no preference _____

In all cases, final assignment and location of tabletop exhibits shall be at the discretion of the MFDA Exhibit Committee.

Exhibitor plans to exhibit the following products/services _____

\$ 455.00 per tabletop. This includes one electrical outlet if requested. Each additional electrical outlet will be billed by Mass AV at a rate of \$12.50 + 20% service fee.

We enclose herewith our check or credit card payment in the amount of \$_____ which is payment in full for the exhibit space indicated herein. This rate includes the use of the space from 10:00 A.M. Tuesday, December 2, 2008 to 4:00 P.M. (setup), and again from 4:00 P.M. 6:00 P.M. when the exhibits will be open, as well as 9:45 A.M. – 12:00 Noon Wednesday, December 3, 2008. Teardown shall commence at 1:00 P.M. and must be completed by 3:00 P.M. If exhibitor cancels this contract and notifies the MFDA in writing on or before October 31, 2008, 90% of the price of the exhibit space rental will be returned to exhibitor by the MFDA. After October 31, 2008, no refunds shall be made by the MFDA and the entire amount paid shall be retained by the MFDA.

Exhibitor understands that any additional labor, electrical, carpenter, furniture or other requirements not originally included in the exhibit rental fee shall be the responsibility of the exhibitor. Special service contractor forms for ordering such auxiliary items will be sent from the Hotel Exhibit Manager upon acceptance of this contract.

Exhibitor represents that it has received and read a copy of the rules and regulations of the exhibit, a copy of which is attached, and that these are accepted by exhibitor and made a part of this contract. Exhibitor also agrees to abide by any future rules and regulations which MFDA adopts.

It is understood and agreed that in the case MFDA shall fail to open the exhibit or to furnish space to exhibitor, it will refund to exhibitor all sums paid hereunder, which shall be the full and complete remedy of all loss or damage suffered by exhibitor. Exhibitor hereby waives any claim against the MFDA for any other damages or compensation, including consequential damages.

Exhibitor agrees to hold harmless and indemnify the MFDA, its officers, directors, employees and agents, for all damages, losses, or injuries to any person, which arise from the use or operation of exhibit space by the exhibitor.

Exhibitor shall forward a certificate of insurance evidencing liability coverage in a minimum amount of \$500,000 along with signed contract.

Exhibitor hereby agrees that it is not and does not become under this agreement an agent or representative of the MFDA and that its acts or omissions are not those of the MFDA.

This application shall become a contract when signed and accepted by the MFDA.

- I will need an electrical outlet. *Please check one. An empty box will be viewed as a "no" response.*
 I will not require an electrical outlet

Exhibitor

Date Signed _____

The Exhibitor desires the following wording on our standard 7" by 44" booth sign and in the convention program.

Name of Exhibitor

Contact Person

Address

City, State, Zip Code

Telephone Number / FAX Number

e-mail / website

FOR OFFICIAL USE ONLY

Date Application Received _____

Amount Of Check Received _____

Accepted by MFDA _____

Committee Chair

Date Accepted

The MFDA has assigned _____

Name of Exhibitor

Tabletop Number(s) _____