

**YOUR TOMORROW
IS IN YOUR HANDS
TODAY!**



The AAA is fighting for you!
WE NEED YOUR SUPPORT NOW!



ORGANIZATION INFORMATION

Organization Name _____

Display Name for Exhibitor Signage _____

Primary Contact Person Prior to Show _____

Primary Contact Phone/Email _____

Address _____

City/State/Zip _____

Phone/Email to Publish on Exhibit Map _____

Web Address _____

EXHIBIT BOOTH REPRESENTATIVES

(each space includes 2, titles are required)

Full Name _____

Title _____

Email _____

Full Name _____

Title _____

Email _____

Full Name _____

Title _____

Email _____

Full Name _____

Title _____

Email _____

VEHICLE DRIVERS

Driver Name _____

Cell Number _____

Driver Name _____

Cell Number _____

10' x 10' Booths

____ (\$3,000 members/\$4,750 non-members) \$ _____

Additional 10' x 10' Booths

____ (\$2,750 members/\$4,650 non-members) \$ _____

15' x 25' Vehicle Space

____ (\$2,750 members/\$4,500 non-members) \$ _____

Additional 15' x 25' Vehicle Spaces

____ (\$2,500 members/\$4,450 non-members) \$ _____

Additional Booth Personnel

____ (\$200) \$ _____

Total Amount Due \$ _____

(Non-member pricing includes 1 year of membership with the AAA to begin at the 2015 conference, available for first time members only.)

BOOTH SELECTION/LOCATION

PREFERRED BOOTH/VEHICLE LOCATIONS

(see floor plan on next page):

1st _____ 2nd _____

3rd _____ 4th _____

I would NOT like to be near the following potential exhibitor(s).

please note these are requests only and cannot always be honored

SELECT YOUR PREFERENCE

☐ Booth location choices should take priority over any "not near" requests

☐ "Not near" requests should take priority over any booth location choices

Exhibit locations will be determined on a point system through June 30, 2015. After that time locations will be selected on a first come/first serve basis. During the assignment process staff may need to contact you for additional selections. If there is no response within 48 hours staff will proceed to the next organization on the list in order to keep the process moving forward.

TERMS AND CONDITIONS/ CANCELLATION POLICY

Contracts will only be processed when submitted with a 50% deposit; the full balance must be paid by September 11, 2015. All balances must be paid before exhibits can be set up at the show. All exhibitors must have a badge. Guest tickets are only for use during normal show hours.

Exhibit spaces cancelled before September 11, 2015 will receive a 50% refund of payment. No refunds will be issued after September 11, 2015.



PAYMENT

**50% Deposit Due with Contract/Full Payment by September 11, 2015

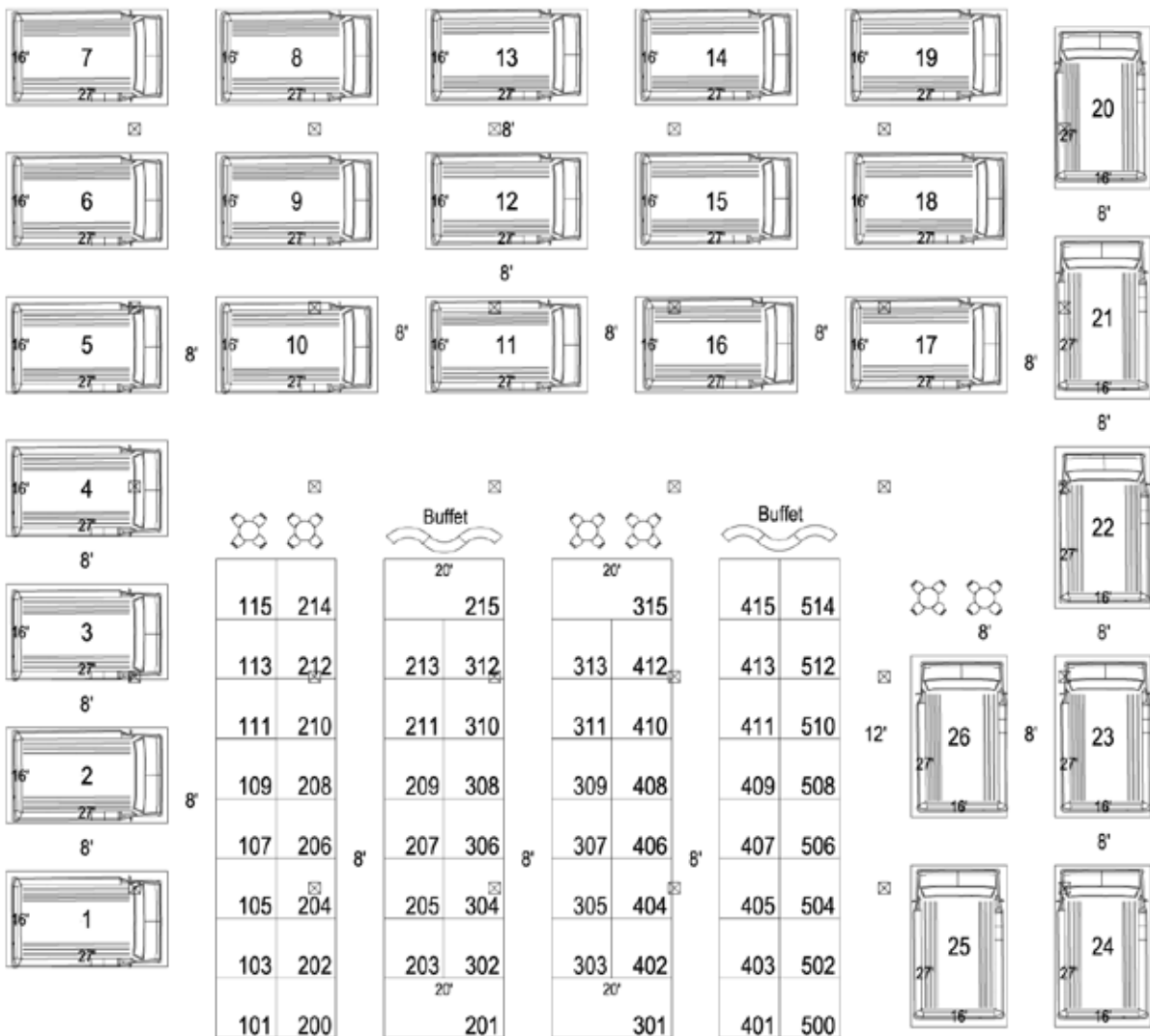
**Submission of this contract equals acceptance of the AAA Terms and Conditions/Cancellation Policy

Check/Credit Card Number _____ Expiration Date _____

Name on Card _____

Authorized Signature _____

☐ Charge Deposit Only ☐ Charge Full Amount Due



ENTRANCE

Booths 201, 301, 215, and 315 are reserved for Gold Level and Above Sponsors.

AMERICAN
AMBULANCE
ASSOCIATION

CONTRACTS AND QUESTIONS MAY BE SUBMITTED TO:

E-mail: info@the-aaa.org | Phone: 703.610.9018 | Fax: 703.610-0210

Mail: 8400 Westpark Drive, 2nd Floor, McLean, VA 22102