

CONTRACT & SPACE RESERVATION FORM

2010 Ohio Turfgrass Conference and Show December 6 – 9 (Conference) • December 7 – 8 (Trade Show) Greater Columbus Convention Center • Columbus, OH

Sponsored by The Ohio Turfgrass Foundation. Managed by Offinger Management Co.
Exposition property of OTF. Trademark and Service Marks property of OTF.

Fill in boxed areas

**PLEASE PRINT. A countersigned copy of this contract confirming
your space and an Exhibit Kit will be mailed to you.**

Address all Applications and Make Checks Payable to:

Ohio Turfgrass Foundation • 1100-H Brandywine Blvd • Zanesville OH USA 43701-7303
Ph: 888.683.3445 • Fax: 740.452.2552 • E-mail: info@OhioTurfgrass.org

Assignments will be made on a first-paid, first-served basis.

FOR OFFICE USE ONLY

Confirmed Space _____ Priority Points _____
Event Code: E06210 Acct. #062 Exhibitor # _____
Recd _____ Amt _____ Ck# _____ Ackd _____
Accepted by Show Management _____ Date _____

2 THIS CONTRACT IS IN THE NAME OF (to appear in the Show Directory)

Mr. Mrs. Miss Ms.

Your Name _____

Company _____
Company names may be abbreviated.

Address _____

City, State _____

ZIP+4 _____ Nation _____

Phone () _____ Toll Free # () _____

Fax () _____

E-mail _____

Web _____

Completing this form serves management notice that you agree to be contacted by mail, phone, fax and/or e-mail.

3 SPACE CHOICES

I would like the following spaces or as close as possible to them:

1. _____

2. _____

I prefer **NOT** to be located near (not guaranteed) _____

I prefer **TO BE** located near (not guaranteed) _____

Location Option: Linear – in-a-row Corner – one booth at end Peninsula – both at end
 Island – four or more booths Other _____

Product Information: Description of products/services in 25 words or less.

1 PLEASE RESERVE FOR US

SPACES	# BOOTHS		RATES			
			Before	After		
			09/10/10	09/10/10		
1 Booths	ONE	X	\$ 800	\$ 900	=	\$ _____
2 – 4 Booths		X	\$ 650 ea.	\$ 750 ea.	=	\$ _____
5 – 8 Booths		X	\$ 600 ea.	\$ 700 ea.	=	\$ _____
9 – 12 Booths		X	\$ 550 ea.	\$ 650 ea.	=	\$ _____
13+ Booths		X	\$ 500 ea.	\$ 600 ea.	=	\$ _____

MEMBERSHIP

Individual \$85 Organizational \$170 = \$ _____

TOTAL AMOUNT DUE: (U.S. Dollars) = \$ _____

LESS DEPOSIT ENCLOSED: (50% of total required with contract) = - \$ _____

BALANCE DUE: Any balance must be paid no later than 45 days = \$ _____

prior to the Show or space can be reassigned. A 10% additional charge will be added to balance due if not paid in full 45 days prior to Show, October 22, 2010. Payment made within 45 days of Show must be by credit card or cashier's check and there will be a 10% penalty applied to any unpaid balance due.

PLEASE SIGN CONTRACT AT THE BOTTOM

4 PLEASE READ

- The undersigned agrees to abide by the Conditions, Rules and Regulations of the Show as set forth here, enclosed and in the Exhibit Kit issued in advance of the Show. Acceptance of this contract binds us to the payment as set above. Deposits are non-refundable if assignments are made. No refunds within 45 days of the Show's opening date. We understand Management reserves the right to: contact us via any of the means above; demand release of our space for failure of ourselves or our representatives to conform to the rules; reallocate space; offer requested space when available; and reject any and all applications.
- All notices of exhibit space cancellation must be submitted to Management in writing and will be officially dated when received by Management. Cancellations may be accepted at the sole discretion of Management. A \$100 processing fee will apply to all cancellations regardless of cancellation date. Under all circumstances, Management retains the right to sell any space cancelled by exhibitor.
- In the event of cancellation of the Show due to fire, strikes, act of God, government regulations, or any cause beyond control, the Management shall determine an equitable basis for the refund of such portion of Entrance, Publicity, Directory and Exhibit Fee as possible, after consideration of expenditures and commitments already made. Refunds shall be made solely at the discretion of the Management.
- OFFINGER MANAGEMENT CO., THE SPONSORING ORGANIZATIONS, AND THEIR RESPECTIVE OFFICERS, AGENTS AND EMPLOYEES EXPRESSLY DISCLAIM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE, OR INJURY TO PERSON OR PROPERTY SUSTAINED BY AN EXHIBITOR, HIS AGENTS,

- OR ANY OTHER PERSON, CAUSED BY FIRE, THEFT, WATER, ACCIDENTS OR IN ANY OTHER MANNER, WHETHER CAUSED BY AN ACT OR FAILURE TO ACT, EITHER INTENTIONALLY OR NEGLIGENTLY CAUSED BY CONDUCT OF OFFINGER MANAGEMENT CO., THE SPONSORING ORGANIZATIONS, AND THEIR RESPECTIVE OFFICERS, AGENTS AND EMPLOYEES OR BY A PARTY OR PARTIES OTHER THAN OFFINGER MANAGEMENT CO., THE SPONSORING ORGANIZATIONS, AND THEIR RESPECTIVE OFFICERS, AGENTS AND EMPLOYEES. THE UNDERSIGNED EXHIBITOR HEREBY AGREES TO FULLY INDEMNIFY AND HOLD FOREVER HARMLESS OFFINGER MANAGEMENT CO., THE SPONSORING ORGANIZATIONS, AND THEIR RESPECTIVE OFFICERS, AGENTS AND EMPLOYEES FOR ANY LOSS, DAMAGE OR INJURY SUSTAINED BY AN EXHIBITOR OR ANY OTHER PERSON CAUSED BY FIRE, THEFT, WATER, ACCIDENTS OR IN ANY OTHER MANNER RESULTING FROM THE ACT OR FAILURE TO ACT OF THE UNDERSIGNED EXHIBITOR, HIS AGENTS OR EMPLOYEES, OR BY ANY OTHER PARTY OR PARTIES.
- Exhibitors will display only merchandise regularly sold by them. **No space may be shared or sublet.** Failure to list and pay fees for any and all displayed merchandise by exhibitors shall be deemed cause for cancellation of space.
- Exhibits must remain open until the closing of the Show. Early packing is prohibited. All sales gimmicks, promotions and giveaways must be approved by the Management. Soliciting of trade must be confined to within your own exhibit booth.
- With my attendance at this event, I realize that I and/or my products may be included in publicity photos. I hereby give my consent to the event's producers to use in future promotional materials any such photos and/or comments.

5 AUTHORIZATION

CLIENT'S NAME (please print) _____ **CLIENT'S AUTHORIZED SIGNATURE** _____ **DATE** _____

6 METHOD OF PAYMENT (50% payment due at time of order) All payments in US funds drawn on US banks. \$25 fee charged for returned checks.

Check (Make payable to Ohio Turfgrass Foundation) Cashier's Check/Money Order Debit Card

Credit Card American Express Discover MasterCard VISA

Name on Card (Print) _____

Billing Address _____

Exp Date _____ 3-Digit Security Code _____ Amt to be Charged \$ _____

Card Number _____

NOTE: Any remaining balance due on October 22, 2010 will be charged to credit card provided.