



Southern California Chapter
American College of Surgeons
EXHIBITOR AGREEMENT

Mail to: ACS SOUTHERN CALIFORNIA CHAPTER, 2512 Artesia Blvd., Ste. 200, Redondo Beach, CA 90278

2018 Exhibit Fees:

Early Bird (Full payment by 09/30/2017)	\$2,000
Regular Rate (After 09/30/2017)	\$2,250
Late Rate (After 12/15/2017)	\$2,500

PARTICIPATION

- We would like to exhibit at the meeting. Our Early Bird exhibit fee of \$2,000 is enclosed. (The Early Bird opportunity expires September 30, 2017.)
- We missed the Early Bird deadline. Sign us up for an exhibit at the Regular Rate. Our check or credit card authorization for \$2,250 is attached. (The Regular Rate expires December 15, 2017.)
- We are LATE. Sign us up for an exhibit at the Late Rate. Our check or credit card authorization for \$2,500 is attached. (The Late Rate applies from December 16, 2017.)
- We are interested in being a "Contributing Sponsor". We would like to Sponsor the following: _____ . Please contact me with the details.
- We want to make a prize donation for the Exhibitor prize Drawings. Contact me.

COMPANY INFORMATION (exactly as you want it to appear in the program)

COMPANY NAME

ADDRESS

CITY/STATE/ZIP

TELEPHONE

FAX

E-MAIL

REPRESENTATIVE to whom all communication will be sent

NAME (TO BE USED FOR SIGN AND PROGRAM)

ADDRESS

CITY/STATE/ZIP

TELEPHONE

FAX

E-MAIL



Southern California Chapter
American College of Surgeons
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THIS AGREEMENT IS BETWEEN the Southern California Chapter, American College of Surgeons hereafter known as “CHAPTER”, and _____ (COMPANY) hereafter known as “EXHIBITOR”.

EXHIBITOR agrees to exhibit at the Annual Scientific Meeting of the CHAPTER to take place January 19-21, 2018, at the Four Seasons, Biltmore in Santa Barbara, California. EXHIBITOR will be provided a table top exhibit area upon which EXHIBITOR may display and/or demonstrate products throughout the hours of the Annual Scientific Meeting. The Exhibit hours will be 7 am – 4 pm on January 19th and 20th. EXHIBITOR will be provided one draped 6' table and two chairs. EXHIBITOR agrees to provide CHAPTER payment of \$2,000 by September 30, 2017 to secure the Early Bird exhibit rate. Or, if after September 30, 2017, EXHIBITOR agrees to provide CHAPTER with payment of \$2,250 if paid by December 15, 2017. A fee of \$2,500 is required for agreements received after December 15, 2017.

CHAPTER agrees to acknowledge EXHIBITOR in the Program if Agreement and full payment is received by December 15, 2017, by printing the company name, address and telephone number. In addition, CHAPTER agrees to furnish EXHIBITOR two tickets to the Friday Evening Reception at no cost to EXHIBITOR. Additional tickets to one or more social functions are available at the same charge as for all meeting participants.

The Four Seasons Biltmore prohibits posting of any kind on columns, walls, floors or other parts of the building or furniture without prior written consent of The Four Seasons Biltmore. Repair of any damages in connection with the improper posting or use of improper materials by EXHIBITOR will be at the sole expense of EXHIBITOR.

EXHIBITOR assumes entire responsibility and hereby agrees to protect, indemnify, defend and save CHAPTER, and The Four Seasons Biltmore and its employees and agents harmless against all claims, losses and damages to persons and property, governmental charges or fines and attorney's fees arising out of or caused by EXHIBITORS installation, removal, maintenance, occupancy or use of the exhibition premises or a part thereof, excluding any such liability caused by the sole negligence of The Four Seasons Biltmore and its employees and agents.

In addition, EXHIBITOR acknowledges that CHAPTER, and The Four Seasons Biltmore, do not maintain insurance covering EXHIBITOR'S property in that it is the sole responsibility of EXHIBITOR to obtain business interruption and/or property damage insurance covering such losses by EXHIBITOR.

By signing below, EXHIBITOR acknowledges that s/he has reviewed the preceding information and finds it acceptable. *This agreement must be signed and submitted with full payment of the exhibit fee and received by the CHAPTER prior to the assignment of exhibit space.*

EXHIBITOR - AUTHORIZED SIGNATURE _____

DATE _____

PRINT NAME AND TITLE WITH COMPANY _____

PHONE _____

CHAPTER - C. JAMES DOWDEN, EXECUTIVE DIRECTOR
SOUTHERN CALIFORNIA CHAPTER, AMERICAN COLLEGE OF SURGEONS

DATE _____