



Exhibit Dates:
Friday, January 29 & Saturday, January 30, 2010
Location:
Clarion Meridian Hotel and Convention Center
Oklahoma City, OK

FOR OVMA USE ONLY	
Date: _____	Check #: _____ Amt.\$: _____
ASSIGNMENT OF BOOTH SPACE	
Booth Number(s): _____	
Payment Received:	\$ _____
Balance Due:	\$ _____

Instructions

Carefully read this contract along with the OVMA Exposition Rules and Regulations, located within the prospectus. Payment in full is required within 30 days of submitting the contract for exhibit space. Please make checks payable to the Oklahoma Veterinary Medical Association (OVMA).

Agreement

By execution of this agreement, Exhibitor agrees to lease space at the Oklahoma Veterinary Medical Association Annual Convention and Exposition at the Clarion Meridian Hotel and Convention Center, Oklahoma City, OK, for a term beginning at 8:00 a.m. Friday, January 29, 2010 and ending, 4:30 p.m. Saturday, January 3, 2010.
 This contract is subject to the terms and conditions as stated in the OVMA Exposition Rules and Regulations. By signature on this contract, Exhibitor agrees to abide by the OVMA Exposition Rules and Regulations, as outlined in the exhibitor prospectus, which are part of this contract by reference, and are fully incorporated herein. Exhibiting firms not complying with said rules, having knowledge of them or not, shall be subject to the actions taken by OVMA.

Please Type or Print

List company name **EXACTLY** as you wish it to appear in printed convention materials: (please print clearly)

Company Name: _____
 Company contact person** _____
 Title: _____
 Address: _____
 City/State/Zip: _____
 Phone: _____ Fax: _____
 Email: _____
 Signature: _____ Date: _____

Exhibit Contact person**

(Person in charge on site, if different from above)
 Phone: _____ Fax: _____
 Email: _____
 Address: _____
 City/State/Zip: _____

**** Which contact person should receive expo service materials (booth, freight, lighting information, etc)?**

Company Contact _____ Exhibit Contact _____

Contract Must be Signed

All exhibitors must have an official convention name badge to enter the exhibit hall. Four badges per booth are provided at no charge. Extra badges and **badges made on site will cost \$25**. Please list the names of individuals who will be staffing your exhibit on a separate sheet of paper and enclose with this contract (Please Print Legible or type- used for name tags). Badges that are incorrect due to lack of legibility, will be redone at a charge of \$25.

Name: _____
 Name: _____
 Name: _____
 Name: _____

If you have changes in your booth personnel, please contact the OVMA office (405-478-1002) before January 14. No badge changes will be made after that time without a \$25 charge.

Signed: _____

Location Requested

Referring to the enclosed floor plan, please select three booth numbers according to preference.

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

Proximity: I do/do not wish to be located next to:

Note: All assignments are on a first-come first served basis. We attempt to avoid conflicts where possible. No guarantee is made with respect to assignment of a particular space.

Cost of 8' X 10' Booth Space : \$750.00
Each additional booth: \$725.00
Cost after October 1, 2009: \$800.00

- Payment in full is required within 30 days of submitting the Contract for Exhibit Space.
- No exhibitor will be permitted to exhibit until booth space is paid in full.**

Product or Service to be displayed: _____
 Number of booths required: _____
 Booth size 8' X 10' \$ _____
 Total Amount Due \$ _____
 Allied Member - less \$25 \$ _____
 Box Lunch - Friday - \$15 -half price for exhibitor \$7.50 \$ _____
 Box Lunch - Saturday-\$15-half price for exhibitor \$7.50\$ _____
 Total Amount Due \$ _____

Mail To: OVMA, P. O. Box 14521, Oklahoma City, OK 73113

May also register online at www.okvma.org

PAYMENT OPTIONS

Charge to: VISA MasterCard American Express

Card #: _____
 Expiration Date: _____ 3 digit #(on back) _____
 Signature: _____

