Exhibitor Business Suites

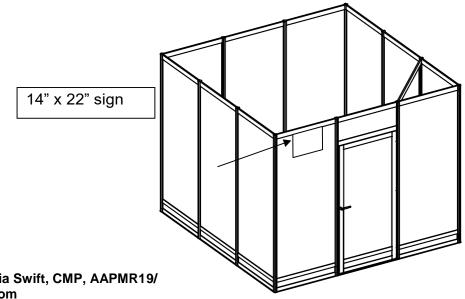
New this year we are offering the opportunity to expand your availability to attendees by offering Business Suites off the show floor with extended hours.

Exhibitor Suite includes:

- Availability Thursday through Sunday
- Space rental
- Fabric (Velcro ready) panels
- Sign (14"x22") with company name or company logo
- Carpet (13 oz.) and first night vacuuming (if applicable)
- Installation and dismantling labor



Complete the order form and return to: Patricia Swift, CMP, AAPMR19/Conventus Media, pswift@conventusmedia.com



EXHIBITOR SUITE	Exhibitor Sui	tes on Show Floor	Exhibitor Suites	off Show floor
Square Footage	100	200	100	200
14" x 22" sign	•	•	•	•
Carpet and First Night Vacuuming	•	•	N/A	N/A
Installation & Dismantling Labor	•	•	•	•
Rental rate	\$4,495	\$6,995	\$6,500	\$8,500
WITH FURNITURE PACKAGE				
Conference Table	40" Round	10' Conference	40" Round	10' Conference
Chairs	4	8	4	8
6' Black Draped Table(s)	1	1	1	1
Wastebasket(s)	1	1	1	1
Rental rate with Furniture Package	\$4,995	\$7,495	\$6,995	\$8,995



Exhibitor Business Suite Application

Company Namo					
Company Name:					
Contact Name:	Contact Email Address:				
	Fax Number:				
Exhibitor Suites on the show floor					
☐ \$4,495 – 10'x10' No Furniture	□ \$6,995 – 10'x20' No Furniture	Larger sizes available upon request			
☐ \$4,995 – 10'x10' with Furniture	□ \$7,495 – 10'x20' with Furniture				
Fullibition Quitage off the about floor					
Exhibitor Suites off the show floor	□ \$0.500 403×203 No Franciscus				
□ \$6,500 – 10'x10' No Furniture		Larger sizes available upon request			
□ \$6,995 – 10'x10' With Furniture	☐ \$8,995 – 10'x20' With Furniture				
Please Note: Exhibitors are responsible for any additional furnishings, electrical, AV, and telecommunication requirements. All ordering information can be found in the AAPM&R Exhibitor Service kit.					
AAPM&R will accept payments by credit card, check, or wire transfer.					
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☐ Check Payment: Make check payable to: AAPM&R19					
☐ Credit Card Payment: ☐ VISA ☐ MasterCard ☐ American Express ☐ Discover					
Full payment must accompany this application.					
Total amount to be charged:					
Card Number:					
Exp. Date:Security Code:					
Name as it appears on Card:					
Credit Card Billing Address:					
Signature:					

Email completed application to: pswift@conventusmedia.com

PAYMENT MUST BE MAILED TO:

AAPM&R19 c/o Conventus Media 55 Ferncroft Rd, Danvers MA 01923