

**EXHIBITOR INFORMATION** | Deadline for submitting space request: May 7, 2010; payment in full due June 1, 2010.

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Province: \_\_\_\_\_ ZIP/Postal Code: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
 Email address: \_\_\_\_\_ Website: \_\_\_\_\_

**PR CONTACT INFORMATION** | The pr contact will receive all exhibit-related materials and correspondence for this event.

Official PR Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Telephone (if different from above): \_\_\_\_\_ Personal Email (if different from main): \_\_\_\_\_

**SIA MEMBERSHIP:** In order to exhibit products at the New York Media Showroom Event the company requesting space must be a current member of SIA in good standing.

**EXHIBIT SPACE / EVENT FEES**

**Exhibit Space Description:** 16 foot linear display space

**Exhibit Space Fees:** \$3,500 | \$1,000 non-refundable deposit due by April 30

**Event fees include:**

- Event space and standard silver color gridwall
- Gridwall space set-up by GES
- Reception the day of the event
- Media attendee recruitment
- Graphic design and invitations to media
- Gift bags for media
- Product storage prior to event
- Private car service for media to discourage "no shows"
- Complete event management
- Lodging reservations assistance
- A follow-up media list and complete contact information

**ACCESSORY EXHIBITORS:** If you would like to order display accessories that form will be made available at a later date.

**Brands to be shown:** \_\_\_\_\_

**Describe the products to be displayed:** \_\_\_\_\_

*By signing this Space Contract, the exhibitor agrees to participate in the SIA New York Media Showroom Event; that the undersigned is empowered to enter into contracts on behalf of the exhibiting company; and this contract for exhibit space is a binding agreement when signed. If an exhibitor cancels 29 days or less prior to the event, they are still liable for full payment of exhibit space fees.*

**AGREED TO:**

Signature of Authorized Representative \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name \_\_\_\_\_ Title \_\_\_\_\_

**PAYMENT INFORMATION** | \$1,000 deposit (an invoice for the balance due, \$2,500, will be sent to you. Full payment of event fees is due by June 1, 2008.)

**If space deposit payment is not received by April 30, 2010, reserved space will be released and reassigned.**

**For more information contact:**  
**Anovia Daniels**  
 Communications & Public Relations Manager  
 703.506.4214  
 E ADaniels@snowsports.org

**Type of payment:** (check one)  AmEx  Diners Club  Discover  MasterCard  Visa  Check Enclosed (payable to SIA)

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card Holder Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

**RETURN COMPLETED FORM TO:**

**SnowSports Industries America**  
 8377-B Greensboro Drive  
 McLean, VA USA 22102-3529

**Or Via FAX to:** 703.821.8276