

Exhibitor Contract/Registration Form

NATIONAL INDIAN COUNCIL ON AGING

2014 BIENNIAL CONFERENCE SEPTEMBER 3 – 6, 2014

SHERATON PHOENIX DOWNTOWN, PHOENIX, AZ

PLEASE TYPE OR PRINT CL	EARLY EXP	EXHIBITOR INFORMATION			
Contact Person:	Phone:		Fax:		
Badge Name 1:	Badge Na	me 2:			
	(We must have names when you	submit contract)			
Address:		City:			
State: Zip:	Tribe/Organization:				
Email					
	COVENANT	-			
of the parties involved. NICOA reserv interest of the Organization. The Exhi directors, employees, and agents from from any damage to property or bodil of exhibition facilities. Exhibitor agree and regulations governing exhibits for encloses the full fee for each space re	essign and/or change exhibit locations for est he right to refuse exhibit space to any bitor indemnifies and agrees to hold harm and against any actions, losses, costs, dy injury to Exhibitor, his agents, represer es not to deface or damage the Sheraton the 2014 Conference, September 2 – 6, quested. Sale of food items is prohibited	y applicants whose exmless NICOA and the amages, claims, and ditatives, employees b Phoenix Downtown pages, the undersigne	chibit is deemed not to Sheraton Phoenix Dow expenses (including atto y reason of the Exhibito property. In accordance	be in the best ntown, their officers orney's fees) arising or's occupancy or us e with these rules	
SIGNATURE:		DATE:			
	E NOTE		EXHIBITOR SCHEDULI		
When signed Exhibitor Contract and P		Move-In/Set-Up:	10:00am – 8:00pm	Tue, Sept 2, 2014	
your packet from NICOA's Conference Coordinator. This packet will inc		Exhibit Hours:	7:00am – 8:00pm	Wed, Sept 3, 2014	
information on shipping, ordering of e		Exhibit Hours:	7:00am – 8:00pm	Thurs, Sept 4, 201	
· · · · · · · · · · · · · · · · · · ·	ost. Therefore, it is NICOA's policy NOT	Exhibit Hours:	7:00am – 8:00pm	Fri, Sept 5, 2014	
	r any reason including cancellation. Do	Exhibit Hours:	7:00am – 3:00pm	Sat, Sept 6, 2014	
not constitute payment. You will rece	xed copies of form and/or payment do vive a confirmation of registration.	Move Out:	3:00pm – 5:00pm	Sat, Sept 6, 2014	
	PLEASE CHECK EXHIBITO	R CATEGORY			
\$400 American Indian Mercha	American Indian Merchandise & Arts & Crafts\$500 Tribe / Tribal Enterprise			se	
\$600 Non-Profit Organization		\$700 Government / Federal Agency			
\$800 Corporate / For Profit En	tities				
	AN ATTEND the Cultural Dinner, Honori				
	use of one exhibit sign, a 10 x 10 area			e registrations	
providing access to any activities of	r meals furnished on site for the two	(2) designated peo	ple exhibiting.		
WHERE TO SEND	THIS FORM AND PAYMENT	BEFORE DEADL	INE OF JULY 31,	2014	
PLEASE SEND FORM AND P	AYMENT TO:	FOR INFO	ORMATION CONTA	ст:	
FAX or EMAIL Exhibitor Form and Credit Card Form		Randella Bluehouse			
info@nicoa.org			Phone: (505) 292-2001		
National Indian Council on Agi	ng Inc	Fax: (505) 292-2001			
Attn: 2014 NICOA Conference	118, 1116.	Email: info@nicoa.org			
10501 Montgomery Blvd. NE,	Suite 210	Email: iiii	o @ meod.org		
Albuquerque, NM 87111	34.00 = 10				
Received by:	Date:	Payment Received: \$			
Check Number:	No	tes:			