



Exhibit Space & Services Contract
January 23-25, 2009
Cobb Galleria Centre • Atlanta, GA

1. Contact Information:

Company Name _____

Exhibiting Company Name (if different) _____

Billing Address _____

City _____ State _____ Zip _____ Country _____

Primary Show Contact _____ Title _____

Contact Phone _____ Toll Free Phone _____ Fax _____

Email _____ URL www. _____

Address to Mail Exhibit Materials (if different) _____

City _____ State _____ Zip _____ Country _____

Company Description (30 words) _____

2. Preferred Booth Location:

(Show Management will make every attempt to accommodate, but cannot guarantee requested space) List your top 3 preferred booth numbers and check pavilion location below.

#1 _____ #2 _____ #3 _____

- Caribbean International Southeast USA
 Mexico/Central & South America

3. Booth Package Rates: (per 10'x10' booth)

Booth Package Includes:

Decoration - (1) 6ft white draped table • carpeting • pipe and drape back-wall and side railing • (2) chairs • wastebasket • 7"x44" b/w organization Identification sign
Promotion - 1c x 2" ad in The Show Guide (must be received by November 1st) • organization name, description, and web link listed on Show web site • Show-only trip package/product discounts listed on Show web site and in Show Guide • 10 Complimentary expo-only attendee passes

	<u>Cost per 10'x10' booth</u>		<u># of booths</u>		
<input type="checkbox"/> Standard Rate	\$2,650	x	_____	=	_____
<input type="checkbox"/> Multiple Space Rate – 4 or more	\$2,500	x	_____	=	_____

Discounts

- Partner Member Discount** 10% off \$(_____)

Industry Partner Name _____

Total Amount Due: \$ _____

4. Payment

100% of the total amount is due within 30 days upon signing this Exhibit Space & Services Contract and must be sent to Show Management with a copy of the original signed contract. Contracts received on or after December 1, 2008 — Full Payment is due immediately.

- Check** - Make payable to Atlanta Travel Expo, in U.S. Funds and list Exhibiting Company Name on payment.

- I would like to make a credit card payment through Paypal.*** Amount: \$ _____

* Once your contract is received, you will receive an email request for payment from MSE Management to make your credit card payment via Paypal.

- Wire Transfer:** Date sent _____
 Send to: Wachovia Bank, Port Chester, NY; Account Name: MSE Management, Inc., ABA (Routing #) 026-012-881. A/C #2000008788377 • **List Exhibiting company name** on Wire Transfer for tracking purposes • Copy of wire transfer confirmation must be sent to MSE Management within 1 week of bank transaction.

5. Cancellation Policy

In the event the Exhibitor cancels all or part of the exhibit space contracted for herein, the Exhibitor must do so in writing, by certified mail, and will be obligated to pay the following amounts:

<u>Time Period</u>	<u>Liquidated Damages</u>
June 1 - August 31, 2008	25% of exhibit space fees
September 1 - November 30, 2008	50% of exhibit space fees
On/After December 1, 2008	No refund

6. Contract Agreement:

By completing this Exhibit Space & Services Contract, Exhibitor agrees to the Cancellation Policy along with the Terms & Conditions, all of which constitute a part of the Contract. The individual completing this Contract represents and warrants that he/she is duly authorized to execute this binding Contract on behalf of named Exhibitor. For complete rules & regulations, please visit www.atlantatravelexpo.com.

Signature _____ **Date** _____

Name (please print) _____

Title _____

The Atlanta Travel Expo 2009 Exhibit Space & Services Contract is a binding agreement with named Company and MSE Management, Inc.

Instructions:
 Please read, complete, sign and return to Show Management with the appropriate deposit

Mail to: The Atlanta Travel Expo, c/o MSE Management, 50 Holly Hill Lane, Greenwich, CT 06830

Fax: (203)622-6333 **Email:** exhibiting@atlantatravelexpo.com

Questions
Phone: (203) 622-1710 **Online:** www.atlantatravelexpo.com