

HYPNO-EXPO 2012

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Calling All Exhibitors
*Tables are limited.
Available on a first come basis!*

APPLICATION TO EXHIBIT

Available on a first come basis!

One full week of Learning! **Daytona Hilton in Daytona Beach, FL** May 16th – 22nd, 2012
Make your hotel reservation by **April 11th, 2012** to receive a discount. **Call the hotel directly** at 1-386-254-8200. Mention the 'Hypnosis Conference' Reservation code 'HYP12" to get the special room rate.

To Register Online: use this link or visit the 'Annual Conference' page on our web sites

http://www.hilton.com/en/hi/groups/personalized/D/DABDHHF-HYP12-20120517/index.jhtml?WT.mc_id=POG

******* NO EXHIBIT SPACE WILL BE ASSIGNED UNTIL PAYMENT IS RECEIVED *****!**

You are hereby authorized to reserve #___ exhibit table/space @ \$175.00 each, for which we have included a non-refundable payment of \$175.00. Please make checks payable to IACT. (Note: If for any reason this application is denied, payment will be immediately refunded)

Presenters: Payment is due NOW to reserve your space. Tables are limited and available on a first come basis!

Company/Individual Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Day Ph: (____) _____ Fax: (____) _____ Email: _____

******* IMPORTANT INFORMATION *******

Exhibit fee includes:

One 6' draped Table w/ 2 chairs

The exhibit area will be ready for set-up and installation at 8am on FRIDAY

Installation must be completed by 12:00 noon Friday, May 18th

Bring Extension Cords! Electricity is available to those who need it. If the hotel is requested to provide extension cords YOU will be charged a fee by the hotel!

You have only the space provided – NO extra tables, etc unless you pay for them!

Doors open to the public at 8:00 am Friday, May 18th. Any exhibit table not set up and occupied by noon, Friday may be canceled or reassigned without refund. All exhibits must be broken down and removed by 6 pm Sunday.

The Promoters and the Daytona Hilton do not guarantee or protect exhibitors against loss, theft or damage of any kind. Description of products or services MUST accompany this application. Please clearly describe what you plan to exhibit.

I agree with the above terms of this document.

Signature: _____ Date: _____

CC# _____ Exp _____ CVV# _____ (Amex/Disc/ Visa/MC)

Check # _____ Amount \$ _____ Date Received: _____ Exhibit Space # _____