Exhibitor Registration Form

Below is the contract for exhibit space and services offered by the Joint Meeting of NCNMLG and MLGSCA Medical Library Association Chapters. The meeting will be held at the Parc 55 Hotel, 55 Cyril Magnin St, San Francisco, CA 94102.

Exhibit dates are scheduled for February 23rd and 24th, 2011. February 23: 5:30 pm - 7:00 pm February 24: 8:00 am - 5:00 pm

In accordance with the specifics outlined in the Exhibit Rules, Regulations and Meeting Facts, I hereby accept the terms and conditions for exhibiting at the Joint Meeting. This completed form is a binding agreement between the exhibitor and the NCNMLG /MLGSCA Chapters.

Signature: _____ Date: _____

Print Name: _____

Please type/print information EXACTLY you would like it to appear in the Final 2011 Joint Meeting Program and on the Website http://ncnmlg.mlanet.org/jtmtg2011/

Company Name:		
Address:		
Phone: Fax	:	
Email:		
Website:		
Contact Person:		
Title:		
Product/Service:		
Company description for the website:		
Please check the appropriate space:		
Exhibitor Fee, if paid on or before January		\$800.00
Exhibitor Fee, if paid on or after January 19	5, 2011	\$900.00
Please sign and return the form to Cindy Perkins, Children's Hospital Central California. Fax to 559-353-6176 or email <u>cperkins@childrenscentralcal.org</u>		

Cancel before January 14, 2011	
Cancel after January 14, 2011	

50% refund Refund Not Available