

2011 APPLICATION AND CONTRACT TO EXHIBIT

We agree:

1. To a deposit of 50% of the total amount owed by **31 March 2011** that must accompany this application for priority space assignments. Checks must be made payable to: World Allergy Organization.
2. To all provisions of the Rules and Regulations, Exhibitor and Payment Information, as hereby published, shall be part of this contract. Application and full payment are due by **1 September 2011**. We hereby apply, subject to the terms of the WAC printed Rules and Regulations, for exhibit space for our occupancy.

PLEASE RETAIN A COPY OF THIS CONTRACT FOR YOUR FILES and return this original application with the appropriate payment information. Exhibition space will be given on a first come, first serve basis. Please send this completed application and payment to:

**World Allergy Organization
Attn: Meetings Department**

555 E. Wells Street, Suite 1100
Milwaukee, WI 53202, USA
Fax: +1.414.276.3349
Email: wac2011exhibition@worldallergy.org

Contact Details

Please type or print clearly.

Company/Organization Name: _____

Contact Person: _____ Title: _____

Address: _____

City/State: _____ Country: _____ ZIP/Postal Code: _____

Phone: _____ Fax: _____

Email: _____

Exhibition Reservations

EXHIBITOR TYPE

- Technical/For-Profit Organization
- Educational/Non-profit Organization

EXHIBIT TYPE

- Shell Scheme Package – \$750 USD (excluding VAT) per square meter
- Space Rental Only (Height: 2.8 meters) – \$550 USD (excluding VAT) per square meter
- Space Rental Only (Height: 8 meters) – \$1,000 USD (excluding VAT) per square meter

Size of Space Requested _____ meters x _____ meters (request is not guaranteed.)

Total Exhibition Fee: \$ _____ USD

Competitors we do NOT wish to be near (This may limit your ability to obtain the best available space):

Companies we would like to be near:

The assignment of space is at the sole discretion of the WAO Secretariat.

Please detach and return this completed application with required payment to:

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EXHIBIT DIRECTORY INFORMATION

All information listed below will appear in the Final Program Exhibitor Directory. Information will be printed exactly as it appears below. Please type or print clearly.

Company/Organization Name: _____

Address: _____

City/State: _____ Country: _____ ZIP/Postal Code: _____

Phone: _____ Fax: _____

Website: _____

Email (Optional): _____

Product/Service Description: (75 words or less): Please send electronic version to wac2011exhibition@worldallergy.org by **1 September 2011**. WAO reserves the right to edit all copy submitted.

Payment Information

Applications submitted on or before **31 March 2011** require a 50% deposit of the total exhibition fee. Application and full payment are due by **1 September 2011**.

Total Exhibition Fee: \$ _____ USD

Please indicate your method of payment:

- Non-Profit Organization requesting complimentary exhibit space
- Check – Make checks payable to: World Allergy Organization
- Wire Transfer - Please contact WAO (jsmazik@worldallergy.org) for wire transfer information
- Credit Card – Please complete the information below:

Card type: VISA MasterCard American Express

Card Number: _____

Expiration Date: _____ Security Code: _____

Cardholder's Name: _____

Billing Address: _____

Agreement Terms and Conditions

The exhibitor shall be responsible to pay for any and all damages to property owned by the Cancún Center and its owners or managers, which result from any act or omission of the exhibitor. The exhibitor agrees to defend, indemnify and hold harmless, the World Allergy Organization, its owners, managers, officers or directors, agents, employees, and subsidiaries and affiliates, from any damages or charges resulting from the exhibitor's use of the property. The exhibitor's liability shall include all losses, costs, damages, or expenses arising from, out of, or by reason of any accident or bodily injury or other occurrences to any person or persons, including the exhibitor, its agents, employees and business invitees which arise from or out of the exhibitor's occupancy and use of the exhibition premises, the Cancún Center or any part thereof.

In addition, the exhibitor acknowledges that the World Allergy Organization, the Cancún Center, and all other service providers do not maintain insurance covering the exhibitor's property and that it is the sole responsibility of the exhibitor to obtain business interruption and property damage insurance.

The exhibitor agrees to observe the rules of the exhibition as set forth in the "Exhibit Rules and Regulations" section of the Exhibition Prospectus for the World Allergy Organization, World Allergy Congress 2011 in Cancún, México. Acceptance of this application by the organizer converts this into a contract for exhibit space.

Authorized Signature _____

Print Name & Title _____

Date _____

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