

Family Respite Care Services, Inc
205 N Main street, suite 107, Janesville WI 53545
608-758-0956 family.respite@sbcglobal.net www.rockcountyrespite.org

4th Annual Statewide Respite Conference
Holiday Inn Express Convention Center
3100 Wellington Pl
Janesville, WI 53545

2009 Conference Application and Contract for Exhibit Space

Exhibitor Date: Wednesday October 7th 2009

Exhibiting Agency:

Contact person: _____ Title: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

Email: _____

Brief description of product/Articles to be displayed:

Exhibition Costs

Non-profit Exhibitors: 1 Table \$50.00 _____
2 Tables \$75.00 _____

Commercial Exhibitors:

Option A- 1 Table \$125.00 _____
Option B- 2 Tables \$250.00 _____
Option C - 1 Table \$100.00 & Raffle item donation value \$25.00 _____
Option D - 2 Tables \$200.00 & Raffle item donation value \$50.00 _____

Sorry, I am unable to attend this year, but I would like to send some materials (Brochures/flyers/promotional giveaways) for the Resource Information table. **Fee - \$25.00**

I would like to donate the following products for the FRCS raffle:

I am not a presenter but wish to purchase the conference lunch **Fee- \$25.00**

_____ Value: \$ _____

Our Organization would like to be a sponsor of this year's conference. (Recognition will be given in conference program.) _____ \$100 _____ \$101-\$250 _____ \$251-\$500 _____ \$501-\$1,000 _____ over \$1,000

Total Amount Enclosed: \$ _____

2009 FRCS, Inc Exhibit Contract Guidelines

General Information:

Family Respite Care Services, Inc provides access to space, at a cost, to approved exhibitors. Acceptance of an exhibit is not to be construed or promoted as an endorsement by FRCS, Inc.

FRCS, Inc will place your information in the Conference program.

Acceptance of Exhibitors:

Acceptance of exhibitors is in discretion of Family Respite Care Services, Inc. An application to exhibit is not accepted until the exhibitor is notified of the acceptance.

Product Sales:

The Exhibitor assumes responsibility for securing all appropriate licenses for the sale of merchandise and is solely responsible for the collection of all applicable state and local taxes.

Liability:

All Exhibition merchandise and property is the responsibility of the Exhibitor. FRCS, Inc will not be held responsible for any loss of such belongings.

Do you qualify for Non-profit status? Yes No

If yes, a copy must be submitted of your 501(c)3 letter from the IRS

Do you plan to sell products in the exhibit area? Yes No

If yes, exhibitor takes responsibility for securing vendor license, and collecting all applicable local/state taxes.

Deposit, Payment & Cancellation:

Payment must accompany Exhibit Contract to secure space. If full payment is not received by August 31, 2009 FRCS, Inc may resell, reassign or reuse the space. No exhibitor will be permitted to erect a display until space rental is paid in full. **Checks should be made payable to: Family Respite Care Services, Inc. and sent to: FRCS, Inc., Attn: Exhibit Space, 205 N. Main St, Suite 107, Janesville, WI 53545.** If notification of cancellation is made before July 31, 2006, FRCS will refund amount paid. If notification is after July 31, 2009 only 50% of total paid will be refunded.

Agreement – Deadline: August 31, 2009

Therefore, the undersigned agrees to all terms, regulations, and conditions set forth in the Exhibitor Guidelines and application is hereby made for exhibit space at Janesville Holiday Inn Express Convention Center. The undersigned agrees to pay full balance of rental space by August 31, 2009.

Authorized Signature

Date