MEETING ROOM RENTAL AGREEMENT

(For Exhibitors with exhibit space of 200 sq. ft. or more.)

Conference & Exhibition: October 12-14, 2021 Navy Pier | 600 East Grand Avenue | Chicago, IL, USA



MEETING ROOM RESERVATION SELECTION

I would like to reserve the following meeting room days and times:

Full Day

(Association Rate: \$500 / Standard Rate: \$650)

- Tuesday (Oct. 12)
- Wednesday (Oct. 13)
- Thursday (Oct. 14)

Half Day

(Association Rate: \$300 / Standard Rate: \$350)

Tuesday AM Tuesday PM

Wednesday AM

U Wednesday PM

Thursday AM

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	Thursday PM	

Association Rate:

 #	Full	Days	a	\$500	each	=	\$
 #	Half	Days	a	\$300	each	=	\$

Standard Rate:

		Tota	l Due	=	\$
#	# Half Days @	\$350	each	=	\$
#	# Full Days @	\$650	each	=	\$

 Largest number of people
expected at one time

Preferred	room	set-up	
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(please provide by August 12, 2021)*

U-Shape Reception

Classroom

Conference Style

Other ____

* Changes after August 12, 2021 will incur a \$250 fee.

Theater Style

(Please plint)
Company
Stand number
Total square feet of stand space
Contact person
Street address
City
State/Province
Zip/Postal code
Country
Telephone
Mobile
Email

CORPORATE LOGO RECOGNITION ON SIGNAGE

I agree to provide my corporate logo in an .eps file format to Lori Reynolds via email at lori@filtxpo.com within five business days of signing the Meeting Room Rental Agreement. If my corporate logo changes, I will notify Lori Reynolds and send the new corporate logo in an **.eps** file format.

Due to the production time of certain items, if a graphic change occurs, it is not guaranteed that the item can be printed with the new graphic. Please confirm the production times of each individual item for any changes.

* Signage at the venue may not be available for those reserving a meeting room after August 12, 2021.

PAYMENT SCHEDULE

Full payment must accompany this signed agreement. Without full payment, the meeting room may be released, reassigned, and this Meeting Room Rental Agreement will be voided.

PAYMENT METHOD

O American Express	O MasterCard	O Visa	O Check / Money Order (in U.S. funds drawn on U. be made payable to FiltXPO™ 2021 and reference FiltXPO	
O Wire Transfer	in US dollars. Ple	ase contact	Tracie Leatham, tracie@filtxpo.com, for wire	e transfer details.
Total Enclosed \$	Card #		Expiration Date	(Month/Year)
CVV Code			Billing Zip Code	
Cardholder's Name	(Please Print		Cardholder's Signature	

AUTHORIZATION

By signing this agreement, I confirm that I have read the above guidelines, and will abide by these terms and conditions. A Meeting Room Rental Agreement must be signed in order to confirm a reservation.

Name		Authorized Signature
	(Please Print)	5
Date		Business Title

CONFIRMATION

You will receive confirmation and the meeting room name once this agreement and payment are received. Agreements are subject to availability and are filled on a first-come, first-served basis.

CANCELLATION POLICY

Refunds due to meeting room cancellations will not be granted. Exhibitors will be obligated to pay any outstanding balance due on meeting room rental fees as outlined in the Meeting Room Rental Agreement.

RETURN APPLICATION TO:

FiltXPO[™] 2021 – Meeting Room Rentals

Mail to: PO Box 1288, Cary, NC 27512-1288, USA

Fax in the U.S.A.: +1 866 770 3291

International Fax: +1 919 459 3701

Email: lori@filtxpo.com

Telephone: +1 919 459 3716

QUESTIONS? Please contact Lori Reynolds

lori@filtxpo.com T : +1 919 459 3716

