

IPAC VENDOR CONTRACT INSTRUCTIONS:

1. Complete and return this contract to the address below.
2. Attach your check payable to IPAC or see payment section for other options.



Contact Information

List the company name, address and phone number as you would like it to appear in the IPAC promotional material.

Company _____
 Address _____
 City _____ State/Province _____ Zip/Postal Code _____
 Contact Name _____
 Title _____
 Phone _____ Fax _____ Email _____

Choose Event Options Below:

<p>Exhibit Space Space price: \$650</p> <p>Number of Spaces: ____ If needing any AV services, please complete the AV Services Request form attached in the email you received.</p> <p><input type="checkbox"/> \$250.00 Tote Bag Insert with Space <input type="checkbox"/> \$500.00 Tote Bag Insert no Space</p> <p>Total Exhibit Fee \$ _____</p> <hr/> <p>Program Advertisement Please choose advertisement option:</p> <p>Exhibitors: <input type="checkbox"/> Full Page - \$360 <input type="checkbox"/> Half Page - \$270 <input type="checkbox"/> Quarter Page - \$180 <input type="checkbox"/> Business Card - \$90</p> <p>Non-Exhibitors: <input type="checkbox"/> Full Page - \$400 <input type="checkbox"/> Half Page - \$300 <input type="checkbox"/> Quarter Page - \$200 <input type="checkbox"/> Business Card - \$100</p> <p>Note: Deadline for all Advertisement is May 12, 2014.</p> <p>Total Ad Fee \$ _____</p> <p>Send Electronic Advertisements To Kathlea.Vaughn@dhs.gov</p>	<p style="text-align: center;">Sponsorship</p> <p style="text-align: center;">Please indicate sponsorship option(s):</p> <p style="text-align: center;">Gold:</p> <p><input type="checkbox"/> \$5,000.00 Welcome Reception (Sun.) <input type="checkbox"/> \$5,000.00 IPAC Social Event (Mon.) <input type="checkbox"/> \$3,000.00 Conference Program <input type="checkbox"/> \$2,500.00 Conference Program Back Cover <input type="checkbox"/> \$2,500.00 Conference Pens and Notepads</p> <p style="text-align: center;">Silver:</p> <p><input type="checkbox"/> \$1,250.00 General Session (Speaker Name _____) <input type="checkbox"/> \$1,500.00 Conference Tote Bags <input type="checkbox"/> \$1,500.00 Conference Lanyards <input type="checkbox"/> \$1,000.00 Refreshment Breaks</p> <p style="text-align: center;">Total Sponsorship Fee: \$ _____</p> <hr/> <p style="text-align: center;">Literature Table Price: \$400</p> <p style="text-align: center;">Note: Deadline for samples of the literature is July 1, 2014.</p> <p style="text-align: center;">Total Table Fee: \$ _____</p> <hr/> <p style="text-align: center;">TOTAL FEES: \$ _____</p>
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Please send payments and contracts to:

Reid Klion, IPAC Financial Officer
 c/o pan
 11590 N. Meridian St. #200
 Carmel, IN 46032
financial@ipacweb.org (email)
 (317) 814-8888 (fax)

- Check _____
 - Credit Card _____
 Visa Mastercard AmEx Discover
- Name: _____
 Card Number: _____
 Expiration Date (MM/YYYY): _____ CSC: _____

If you require invoicing, please contact Reid Klion at rklion@panpowered.com

Acceptance of Terms

The above signed company, having read and agreed to the Terms and Conditions, will contract for exhibition space and/or other services for the 2014 IPAC Annual Conference scheduled July 20 – 23, 2014. Exhibit space, sponsorship and/or promotional services will not be guaranteed until receipt of payment.

Signature _____ **Date** _____

Print Name: _____ **Phone:** _____