Exhibit Contract

2015 Annual Symposium
Las Vegas

NANT

Please complete the contact information below. This person will receive all exhibitor correspondence.

Company Name: _____

Contact Person: _____ ***Title:*** _____

Address: _____

_____

City: _____ ***State:*** _____ ***Zip Code:*** _____

Phone: _____ ***Fax:*** _____

E-mail: _____ ***Website:*** _____

****Booth Personnel:*** _____

**You may email the names of your booth personnel to* nant@meinet.com.

Booth Size	*Corporate Member*	*Non-Member*	*Booth Preferences**
☐ **10' x 10'**	$1,995	$2,295	1st
☐ **10' x 20'**	$3,495	$3,995	2nd
☐ **10' x 30'**	$4,895	$5,595	3rd
☐ **10' x 40' or 20' x 20'**	$5,995	$6,895	4th
☐ Not-for-profit and certification organizations**:** $795			

** Sponsors and 2014 symposium exhibitors will receive priority booth assignments*

We prefer not to be located near the following companies:

_____

Products/Services Description Please provide an optional 50-word description of your products and services that will be included in the program materials for all attendees. Descriptions must be submitted no later than **27 February 2015**. Please e-mail your descriptions to nant@meinet.com.

Payment of Fees Booth space is confirmed when full payment is received; sponsors and 2014 symposium exhibitors will receive priority booth assignments. The contract and payment deadline for inclusion in the program is **27 February 2015**. Exhibit fees must be paid by check or credit card (American Express, MasterCard or Visa). NANT Tax ID Number 14-1722307.

In accordance with the terms, conditions and regulations governing exhibits at NANT meetings, the undersigned hereby makes application for exhibit space that when accepted by NANT becomes a contract. All rules and regulations as outlined in the exhibit prospectus, as well as any amendments published by NANT are part of this contract. Failure to abide by such rules and regulations results in forfeiture of all monies paid or due to NANT under terms of this agreement.

_____

Signature **Date**

Payment Information (FIN # 14-1722307)

❑ Payment enclosed. Please make check payable to NANT.

❑ Credit card *American Express - MasterCard - Visa* Amount: $ _____

Card #: | | | | | | | | | | | | | | | | **Exp:** _____

Name on card: _____ **CVV:** _____

Signature: _____

PLEASE SEND COMPLETED APPLICATION AND PAYMENT TO: NANT, PO Box 2307, Dayton, OH 45401-2307
11 W Monument Ave, Suite 510, Dayton, OH 45402 ● P: 877.607.NANT ● F: 937.586.3699 ● nant@meinet.com