GAPNA
Gerontological Advanced Practice Nurses Association

34th Annual Conference – San Antonio, TX
September 30-October 3, 2015
Marriott Rivercenter Hotel

2015 APPLICATION FOR EXHIBIT SPACE

GAPNA
c/o Anthony J. Jannetti, Inc.
East Holly Avenue / Box 56
Pitman, NJ 08071-0056
Telephone – 856-256-2374
Fax – 856-589-7463

Booth Fees

10x10	$2,375.00
10x20	$4,600.00
20x20	$7,600.00

GAPNA Use Only

Booth Assigned _____

Received _____ Price _____

We hereby apply, subject to the terms of your printed prospectus and rules and regulations of this meeting for space in the exhibit area, as follows:

A. Program Book Information (Please complete the following information as it should appear in the Program Book.)

Company Name

Address

City State Zip

Main Phone Number Main Fax Number

Customer Service E-mail

Web site

B. Mailing Information (Please complete personal E-mail, contact name, phone, and fax. The remaining information only needs to be completed if different than Section A.):

Contact Name

Company Name

Mailing Address

City State Zip

Phone Fax

Contact E-mail (encouraged for receipt of exhibit updates)

C. Product Description: Please provide an optional 50-word description of your exhibit display and products that will be included in the Program Book. Copy exceeding this limit will be edited. Write-ups must be submitted no later than August 14, 2015 to be included within the Program. Please E-mail your write-up to **gapna_writeup@ajj.com**.

D. Choice of Booth(s): (Give at least six choices)

1st Choice _____ 2nd Choice _____ 3rd Choice _____

Number of Booths Requested: _____ Size of Island Space Requested: _____

If possible, **do not** assign us space near: _____

We agree that we may not receive one of our preferred choices. However, the exhibit manager will try to make assignments in the requested area. Assignment of space will be considered accepted unless rejected, in writing, within seven days from the date of receipt of notification of space assignment. Once initial booth assignments are made, booths will be assigned on a first come, first served basis. Payment in full is due upon receipt of confirmation. A deposit in the amount of 50% for each exhibit space is required with application for exhibit space. **Applications submitted after March 2, 2015 must be accompanied by payment in full.** All provisions of the official rules and regulations as published in the official prospectus shall be part of this contract.

E. Payment Information / Optional Enhancements to Exhibit Space:

Number of booths or island size requested: _____ at a cost of $ _____

50% minimum deposit for application submitted with application ..... $ _____

100% of booth fee with applications submitted after March 2, 2015 ..... $ _____

_____ Advertising space in the Official 2015 Program (see details within exhibit prospectus) ..... $ _____

_____ Sponsorship Option(see details within exhibit prospectus) ..... $ _____

TOTAL PAYMENT ENCLOSED ..... **$** _____

F. Payment by Check (Tax ID No. 93-0832304)

Mail check payable in U.S. Funds to:
GAPNA
c/o Anthony J. Jannetti, Inc.
Postal - *Box 56, Pitman, NJ 08071-0056*
UPS/Overnight Service – *200 East Holly Avenue, Sewell, NJ 08080*
856-256-2374 / Fax 856-589-7463

G. Full Payment by Credit Card (Tax ID No. 93-0832304)

☐ American Express ☐ Visa ☐ Mastercard

Name on Credit Card _____

Credit Card Number _____

Charge Amount _____

Expiration Date _____

Signature _____