



Application and Contract for Exhibit Space

2012 Annual Convention and Exhibit Show "Mission Possible"

May 2-4, 2012

Osthoff Resort, Elkhart Lake, WI

Contract Application for Exhibit Space

Company information (Please type or print)

(As you would like it to appear on Promotions & Identification Sign)

(Pre-show contact for vendor correspondence)

Company Name: _____

Name: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Web Site: _____

Phone: _____

Show Contact Person: _____

E-Mail: _____

Description of equipment, products or services to be displayed (For final convention program, 50 words or less):

Booth location choices: 1st Choice # _____ 2nd Choice # _____ 3rd Choice # _____

Booths Terms and Conditions

1. All booths are 8'x10' with draping and include one 8 foot skirted table, one 110v electrical outlet, 7" x 44" identification sign, 2 chairs, and wastebasket. Additional tables, furniture and electrical service can be ordered through the exhibit management company, Valley Expo. Forms will be sent via exhibitor kit.
2. Corporate partners receive one complimentary registration to all educational sessions during the conference. Pre-registration is required to use the complimentary registration. You **must call WHIMA to register** for the educational sessions. Full payment MUST accompany a signed, complete contract.
3. All exhibit reservations and confirmations are made on a first-come, first-serve basis.
4. All exhibitors shall abide by the Exhibit Regulations listed on the backside of this contract application.
5. Enclose full exhibit fee and contract application to secure exhibit space and/or a time slot in the Innovation Theater.

Corporate Partner (eligible 2012 Corporate Partners)

Non-Corporate Partner

- | | |
|--|--|
| <input type="checkbox"/> \$375 <i>(each, payment & signed contract received by 1/05/12)</i> | <input type="checkbox"/> \$450 <i>(each, payment & signed contract received by 1/05/12)</i> |
| <input type="checkbox"/> \$525 <i>(2 booths, payment & contract received by 1/05/12)</i> | <input type="checkbox"/> \$600 <i>(2 booths, payment & signed received by 1/05/12)</i> |
| <input type="checkbox"/> \$425 <i>(each booth, payment & signed contract postmarked by 2/16/12)</i> | <input type="checkbox"/> \$500 <i>(each booth, payment & signed contract postmarked by 2/16/12)</i> |
| <input type="checkbox"/> \$725 <i>(2 booths, payment & signed contract postmarked by 2/16/2012)</i> | <input type="checkbox"/> \$825 <i>(2 booths, payment & signed contract postmarked by 2/16/2012)</i> |
| <input type="checkbox"/> \$600 <i>(each booth, payment & signed contract postmarked after 2/16/12)</i> | <input type="checkbox"/> \$700 <i>(each booth, payment & signed contract postmarked after 2/16/12)</i> |

Innovation Theater (Companies can purchase 15-minute time slots for presentations on new products & services on May 3. Limited slots available)

- | | |
|--|--|
| <input type="checkbox"/> \$100 <i>(payment & contract received by 1/05/12)</i> | <input type="checkbox"/> \$150 <i>(payment & contract received by 1/05/12)</i> |
| <input type="checkbox"/> \$150 <i>(payment & contract postmarked by 2/16/12)</i> | <input type="checkbox"/> \$200 <i>(payment & contract received by 2/16/12)</i> |

Total Amount \$ _____

In making application, we agree to exhibit under, and comply with, those rules and regulations, and information for exhibitors, which by reference hereby are made a part of this contract. Wisconsin Health Information Management Association will have the right of interpretation and approval of all matters pertaining to the contract, rules and regulations.

Contact Person (Please Print)

Title

Signature

Date

Telephone Number

Cancellations

A written cancellation received on or before April 17, 2012 entitles the exhibitor to a 50% refund of the exhibit fee. No refunds will be made for cancellations received after April 17, 2012.

Please sign and return with full payment to:

Wisconsin Health Information Management Association
2350 South Avenue, Suite 107
LaCrosse, WI 54601-6272
Attn.: Kari Riley

WHIMA Use Only	
Date Contract Received _____	
Date Payment Received _____	Check ___ CC ___
Data Entry: QB ___ A ___ W ___ E ___	

Exhibit Regulations

1. Full payment is required with application, payable to Wisconsin Health Information Management Association. Payment is required to reserve your booth selection. Cancellations after April 17, 2012 will forfeit full payment.
2. This application for exhibit space becomes effective only after it has been properly executed by the exhibitor, payment is received and accepted by the Wisconsin Health Information Management Association.
3. Each exhibitor must name one person to be his representative in connection with installation, operation and removal of the firm's exhibit.
4. An exhibitor shall not sublet, divide, or share the exhibit space in any manner without written permission from the Wisconsin Health Information Management Association.
5. Exhibits must be staffed during all Show hours and may not, to any extent, be dismantled before the Show closing. Any early dismantling or packing shall be considered a breach of this agreement and may affect future applications.
6. Distribution of advertising materials is limited to the area of each exhibit space.
7. Exhibitors agree not to obstruct the aisles adjacent to the exhibit space. No booth structure or sign will be allowed which obscures adjoining booths. If the exhibit creates a "wall" which projects more than four feet outward from the back wall, its use may be forbidden.
8. Insurance of the exhibitor's property and the exhibitor's protection, and insurance against any other liability or loss must be provided by the exhibitor, and is at the exhibitor's expense. The Exhibitor shall be responsible for any loss of or damage to property including loss or damage occasioned by theft, fire, smoke or other insurable casualty, and WHIMA and Exhibitor expressly waive any claim for liability against the other party with respect to any such loss or damage. The exhibit hall will be locked overnight.
9. The exhibitor agrees that the Wisconsin Health Information Management Association and the Osthoff Resort, and any of their officers, staff members, or employees are not responsible for, and are released from all liability that may occur to the exhibitor, the exhibitor's agents or employees, or the exhibitor's property, during or subsequent to the holding of the annual conference.
10. Each exhibitor shall comply with any/all local and state fire, electrical, and safety regulations in effect at the time of the conference.
11. Only exhibitors with assigned space shall be allowed to operate hospitality suites and social functions at the Osthoff Resort during this annual conference. HOSPITALITY SUITES AND PRIVATE PARTIES SHALL NOT BE OPEN DURING REGULARLY SCHEDULED HOURS OF MEETINGS, EXHIBITS, OR OTHER WHIMA FUNCTIONS.
12. Exhibitors are responsible for making any room reservations directly with the Osthoff Resort.
13. Use of the WHIMA logo by any vendor or exhibitor is forbidden without express written permission from the President or the Executive Director.
14. Should WHIMA find it necessary to employ an attorney to enforce any of the provision of this agreement or to protect in any manner its interest or interests under this agreement, WHIMA shall be entitled to recover from the other party all reasonable costs, charges, and expenses including attorneys' fees.