

# BANFF 2020



## CASEM 2020 Annual Conference Application and Contract

**April 29-May 1, 2020—Fairmont Banff Springs—Banff, AB**

It is understood that all Exhibitors agree to and will comply with regulations and procedures set forth in the Exhibitor Prospectus. It is also understood that this contract for space at the CASEM Annual Meeting does not impose upon the Canadian Academy of Sport and Exercise Medicine and the Fairmont Banff Springs any liability which might be incurred by representatives of the undersigned company as a result of exhibiting at this meeting. The Exhibitor acknowledges that neither the Canadian Academy of Sport and Exercise Medicine nor Fairmont Banff Springs and its exhibit management company carries insurance covering the Exhibitor's property, and that it is the sole responsibility of the exhibitor to obtain business interruption and property damage insurance covering such losses by the Exhibitor. The Exhibitor is also responsible for the appearance and cleanliness of their booth at all times. CASEM and the Fairmont Banff Springs reserve the right to arrange for cleaning at move-out, if required, and invoice the appropriate Exhibitor accordingly. **No cancellation of this agreement will be accepted, nor refund provided after January 31, 2020.** Cancellations prior to that date will be subject to a 20% refund charge. Spaces abandoned or not occupied at the time of opening of the exhibits may be reassigned by the CASEM management for other exhibit uses. **NOTE:** CASEM is entitled to final approval of exhibitors and their exhibits.

Please print legibly your company name and contact information as you wish it to appear on any written material.

Company Name : \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country (if other than Canada) \_\_\_\_\_

Signing Officer: \_\_\_\_\_ Signature: \_\_\_\_\_

Contact Name (for all correspondence): \_\_\_\_\_ Contact Persons Phone:(\_\_\_\_) \_\_\_\_\_

Alternate Phone:(\_\_\_\_) \_\_\_\_\_ Fax:(\_\_\_\_) \_\_\_\_\_

Contact Email: \_\_\_\_\_ Company Website Address : \_\_\_\_\_

**Name of person(s) working the booth (for badges):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EXHIBIT BOOTH PAYMENT

Please e-mail to: [rmenard@casem-acmse.org](mailto:rmenard@casem-acmse.org)

**Early Bird: Application must be received by December 31, 2019**

- 10 x 10 booth..... \$2,800 CDN (+ GST)
- 2—10 x 10 booths..... \$5,000 CDN (+ GST)

**Regular: Return Application by February 29, 2020**

- 10 x 10 booth.....\$3,250 CDN (+ GST)
- 2—10 x 10 booths.....\$6,000 CDN (+ GST)
- 10 x 10 (Not for profit only)\* **limited number available**.....\$1,250 CDN (+ GST)

**In the Nick of Time: Return application after February 29, 2020**

- 10 x 10 booth.....\$4,000 CDN (+ GST)
- 2—10 x 10 booths.....\$7,000 CDN (+ GST)

Cheque # \_\_\_\_\_ (payable to CANADIAN ACADEMY OF SPORT AND EXERCISE MEDICINE) VISA \_\_\_\_\_ M/C \_\_\_\_\_

Credit Card No: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Total Amount \$ \_\_\_\_\_

Expiry Date: month \_\_\_\_\_ year \_\_\_\_\_ CVC \_\_\_\_\_

Name on Card: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_