

# March 2008 SES Exhibit Space Application & Contract

Please complete this application and send it along with payment to: NSSEA, 8380 Colesville Road, Suite 250, Silver Spring, MD 20910. Fax credit card payments to (301) 495-7386.

Receipt of exhibit contract and fees by the deadline does not guarantee exhibit space.

**Priority Booth Assignment  
Deadline: August 24, 2007**

COMPANY

EXHIBIT CONTACT

EMAIL ADDRESS

COMPANY ADDRESS

CITY

STATE

ZIP

PHONE

FAX

WEB SITE

**Please sign:** I have read and agree to comply with the SES rules and regulations. This application becomes a contract upon assignment of exhibit space.

SIGNATURE

DATE

## Mail space confirmation, exhibitor service manual and other information to (if different from above):

NAME

EMAIL ADDRESS

ADDRESS

## Please specify exhibit space (Exhibit space is in 10' x 10' increments):

Total number of 10' x 10' booths: \_\_\_\_\_ Booth size: \_\_\_\_\_ ft. x \_\_\_\_\_ ft. Booth type:  Linear  Peninsula  Island

Booth Preferences: 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_ 4) \_\_\_\_\_ 5) \_\_\_\_\_ 6) \_\_\_\_\_ 7) \_\_\_\_\_ 8) \_\_\_\_\_

\* NSSEA does not guarantee assignment of preferences listed.

## Main Product Lines:

If you wish to avoid being assigned space adjacent to competitors, list those companies below. Every effort will be made to assign space accordingly.

## Nonmembers — Join NSSEA and Save!

Yes, we want to join NSSEA now and save \$600 per 10' x 10' space. In addition, by joining now the \$100 application processing fee will be waived.

*Please check your dues level according to the volume of gross annual sales of products for educational use only.*

Gross Annual Sales:

Dues Amount:

Primary business:

Under \$1,000,000

\$700

Manufacturer

\$1,000,000–\$25,000,000

\$1,200

Content Publisher

\$25,000,000 +

\$1,700

Importer/Exporter

Wholesaler Supplier

Year Company Established: \_\_\_\_\_ Year entered school market: \_\_\_\_\_

Percentage of business in the school market: \_\_\_\_\_

FEDERAL TAX ID #

# OF EMPLOYEES

MEMBERSHIP CONTACT

EMAIL ADDRESS

## Staff Use Only

Orig. Faxed \_\_\_\_\_ Ack. \_\_\_\_\_ Processed Sent \_\_\_\_\_ Points \_\_\_\_\_

## Exhibit Space Fees per 10' x 10' space:

Members: \$1,300 Nonmembers: \$1,900

(Fees must accompany application.)

## Payment

Exhibit space: \$ \_\_\_\_\_

(Total # of 10' x 10' spaces times exhibit space fee)

Membership: \$ \_\_\_\_\_

(enter 0 if already a member)

Total Amount Due: \$ \_\_\_\_\_

Enclosed is my check payable to NSSEA in the full amount of \$ \_\_\_\_\_.

Or charge to my  Visa  Mastercard  Discover  American Express

CARD NUMBER

EXP DATE

SIGNATURE

**Send payment to the address above  
or fax to 301-495-7386.**