



**2021 IAPD/IPRA Soaring to New Heights Virtual Conference
EXHIBIT CONTRACT
January 28-30, 2021**

AGREEMENT

The Illinois Association of Park Districts and Illinois Park & Recreation Association, hereinafter referred to as IAPD/IPRA, are hereby authorized to confirm virtual exhibit space. If you reserved a booth already for the 2021 show, a \$300 per booth deposit was required. The balance must be paid in full by January 4, 2021. Any contracts not paid in full by January 4, 2021, will be considered by IAPD/IPRA, at its option, to have been cancelled by the exhibitor and will be resold. Any deposits paid will be forfeited. **If a deposit was not initially paid, booth fees must be paid in full.** All cancellations must be done in writing and submitted to Sue Triphahn at 4476 Sundance Circle, Hoffman Estates, IL 60192 or emailed to striphahn@ilparks.org or faxed to 847/496-5246. Indicate who the refund check should be made payable to and where it should be mailed. If you cancel for the 2021, your company will retain all priority exhibitor points that have been previously earned. **NO refunds will be processed after January 4, 2021.**

Final Payment and Exhibitor Contract Due by January 4, 2021

NOTE TO EXHIBITOR

Please complete and return this 2021 Virtual Exhibit Space Contract with your payment made payable to IAPD to:

Sue Triphahn
IAPD Conference Director
4476 Sundance Circle, Hoffman Estates, IL 60192
Fax: 847/496-5246
Email: striphahn@ilparks.org

A final confirmation/receipt of virtual booth space will be emailed when final payment has been received.

REGISTRATION

COMPANY	CONTACT PERSON (To receive correspondence/details of the show)		
STREET ADDRESS	CITY	STATE	ZIP
PHONE	EMAIL* (REQUIRED)		

** Please note that the email provided will be the primary method of communication.*

There are (9) booths per virtual exhibit hall.

Booth locations will be assigned alphabetically by company name or by sponsorship level.

We agree to abide by the Exhibit Rules and Regulations, and any amendments thereto, all of which are made a part of this contract.

NAME (TYPE OR PRINT)	SIGNATURE	DATE
----------------------	-----------	------

This contract is not valid without signature.

BOOTH PACKAGE SELECTION:

- Standard Tier 1 with \$300 deposit paid \$450
- Premier Tier 2 with \$300 deposit paid \$700
- Standard Tier 1 with no deposit paid \$750
- Premier Tier 2 with no deposit paid \$1000
- Standard Tier 1 with \$_____ deposit paid \$_____
- Premier Tier 2 with \$_____ deposit paid \$_____

FOR OFFICE USE ONLY

DEPOSIT PAYMENT	DATE
FINAL PAYMENT	DATE
CONFIRMED BOOTH NUMBER(S)	
AUTHORIZED BY	
CHECK	CREDIT CARD

PAYMENT

- CHECK ENCLOSED (PLEASE MAKE PAYABLE TO IAPD)
- CREDIT CARD PAYMENT (PLEASE CHECK ONE)
 - AMERICAN EXPRESS MASTERCARD VISA

CARD NUMBER	EXPIRATION DATE
NAME OF CARD HOLDER	SIGNATURE
BILLING ZIP CODE	CVC# (3 DIGIT CODE)

QUESTIONS? PLEASE CONTACT:

Sue Triphahn, IAPD Conference Director, Illinois Association of Park Districts, 4476 Sundance Circle, Hoffman Estates, IL 60192
P: 847/496-4449 F: 847/496-5246 E: striphahn@ilparks.org