

Application and Contract for Exhibit Space
The Western Section American Urological Association, Inc.
83rd Annual Meeting in Scottsdale, Arizona

Please read, complete and return this form to:

Exhibits Manager
 Western Section AUA Phone: (714) 550-9155
 1950 Old Tustin Avenue Fax: (714) 550-9234
 Santa Ana, CA 92705 Email: info@wsaua.org

Retain a copy for your records and return the completed original with a deposit of \$1,500 per exhibit. Receipt of application will be acknowledged in writing.

Make checks payable to the Western Section AUA.

Deposits/Refunds: The cost per booth or table top is \$3,000. A \$1,500 deposit per booth or table top must accompany this application. If deposit is not made within thirty days of space assignment notification, the space may be reassigned without notification. The balance is to be paid no later than August 28, 2007. Applications submitted after that date must be accompanied by full payment. Faxed applications are not considered received unless verbal or written confirmation is obtained.

Location: Hyatt Regency Gainey Ranch, 7500 E. Doubletree Ranch Road, Scottsdale, Arizona, USA 85258 Tel: 480 444 1234 Fax: 480 483 5550

Official Exhibit Service Company: Tricord Tradeshow Services, Inc.,
 738 Neeson Road, Marina, CA 93933 Phone: 831-883-8600
 Fax: 831-883-8686 / Email: info@tricordtradeshow.com

Meeting Dates:	October 28- November 1, 2007
Exhibit set-up Dates:	October 29 (12noon – 8:00 pm)
Exhibit Show Dates:	October 30-31, 2007
Exhibit move-out Date:	October 31 (after 2pm)
(Preliminary schedule – subject to change)	

All future contact will be addressed to signer, unless indicated below:

Name: _____

Title: _____

TEL: _____ FAX: _____

Email: _____

Address: _____

City: _____ St: _____ Zip: _____

FOR OFFICE USE ONLY

Assigned Exhibit Space(s) _____

Approved By: _____ Date ____/____/____

Deposit \$ _____ Ck# _____ Date ____/____/____

Balance \$ _____ Ck# _____ Date ____/____/____

Booth Selection:

After referring to the floor plan inside the Exhibitor Prospectus, indicate preferred booth or table top location by space number and the number of booths requested. Please spread your choices out. Each table top is 6' and each booth is 8' x 10'.

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

Total space(s) needed: _____ (max 3 booths/tables per company)

Exhibit space assignments will primarily be based according to the date the contract and deposit is received. Other determinants may also be used. Whenever possible, space will be assigned according to the exhibitors request; however, final arrangements will be determined by the WSAUA. The preferences given for exhibit location are for guidance and are not guaranteed.

Please indicate any specific competitors you do not wish to be near:

Please print or type exactly as you wish it to appear in the Exhibitor Directory:

Company Name: _____

Address: _____

City, ST, Zip: _____

TEL: _____ FAX: _____

Web: _____

Email: _____

Agreement: We, the exhibiting company, have received, read and accepted the Conditions for Exhibiting that accompanied the Exhibitor Prospectus for the 83rd Annual Meeting of the Western Section AUA. We, and our representatives, agree to abide by the exhibitor rules and regulations, all of the terms of which are made a part hereof by this reference and fully incorporated herein, and to all conditions under which space at the Hyatt Regency is leased to the Western Section AUA.

Signature: _____

Print name: _____

Title: _____ Date: _____

If accepted, the Western Section AUA will send space assignment notification to you indicating assigned space. It is understood that acceptance of an application to exhibit does not constitute any endorsement by the WSAUA of the products or services offered by Exhibitor, and the Exhibitor agrees to do nothing that would suggest or imply otherwise.