

GLRM2003 EXHIBITION CONTRACT  
May 31<sup>st</sup> - June 2<sup>nd</sup>, 2003

I (we) agree to abide by the EXPOSITION RULES AND REGULATIONS (included in this packet) and I (we) also hereby apply for exhibition space on May 31<sup>st</sup> and June 1<sup>st</sup> at the Great Lakes Regional ACS Meeting, Loyola University of Chicago, Chicago, Illinois, May 31<sup>st</sup> - June 2<sup>nd</sup>, 2003.

Please indicate desired booth location by using the numbers on the attached floor plan

First choice: Booth \_\_\_\_\_ Second choice: Booth \_\_\_\_\_ Third choice: Booth \_\_\_\_\_  
*If you desire more than 1 contiguous booth, list all booths desired as one single choice.*

It is understood and agreed that GLRM2003 will endeavor to assign space in order of choice. If all spaces selected have been previously assigned, the Exhibits Chair reserves the right to assign space as equitably as possible in accordance with the stated exhibitor preference for exhibits.

Please indicate the type of exhibitor:

Industrial, \$500 \_\_\_\_\_ Academic, \$250 \_\_\_\_\_

Each exhibitor will be provided a web link from the exhibits page of the GLRM2003 website. Industrial exhibitors will also receive two registrations for GLRM2003. Academic, governmental, and other non-profit exhibitors will receive one registration for the meeting.

For the benefit of promotion and publicity of the Exposition, I (we) authorize GLRM2003 to use the following description of the products and/or services to be exhibited: (Please limit to 50 words. The Exhibits Chair reserves the right to edit for style.)

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

Company URL for link to website: \_\_\_\_\_

Names of representatives who will receive complementary conference registration:

1. \_\_\_\_\_ 2. \_\_\_\_\_

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

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

Title: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Payment by check only.

**Please make checks payable to: GLRM2003.**

Your copy of the completed form will be returned to you immediately upon acceptance.

Send completed form to:

Avrom Litin  
Exhibits Chair, GLRM2003  
Chicago Section, American Chemical Society  
7173 N. Austin  
Niles, IL 60714

Direct questions to [Alitin@uic.edu](mailto:Alitin@uic.edu) or 312-413-3841

Please Do not write in this space
Assigned booth(s) # _____
Approved by _____
Date of Approval _____

This completed form constitutes a binding agreement between the Exhibitor and the Great Lakes Regional ACS Meeting.

I am familiar with and agree to abide by the Rules and Regulations for GLRM2003 Exhibitors:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_