## \*\*This form is ONLY to be used if paying by CHECK\*\*

### **PURCHASE SPACE ONLINE:**

https://conf.aeaweb.org/exhibitors/
(Opens June 14<sup>th</sup> at 10:00 CST)

# EXHIBIT CONTRACT ALLIED SOCIAL SCIENCE ASSOCIATIONS 2019 MEETING

This application for booth space will become a contract upon acceptance by ASSA. The applicant agrees to abide by all exhibit rules, terms, and conditions. See the attached "Details of the Contract".

#### **BOOTH RENTAL**

The letter next to booth number indicates the price of the booth. All booths are 10' X 10'.

The letter next to booth number indicates the pric	ce of the booth. 7th booths a	me 10 / 10.		
Prior to August 15, 2018:	A booths - \$1900	B booths - \$1700		
After August 15, 2018:	A booths - \$2100	B booths - \$1900		
Note: If you cannot purchase your booth selection be received by August 15, 2018 to receive discount ASSOCIATIONS or ASSA.				
Enclosed is \$ for booth inserted below:	(s). Our space preference i	s indicated by the booth n	umber(s)	
First Choice	Fourth Choice			
Second Choice	Fifth Choice			
Third Choice	Sixth Choice			
We understand this payment is exclusive of other as booth furnishings, shipping and storage fees, Each booth gets up to four complimentary Exhibit as a regular attendee.  I want to add my site to the AEA website for an a	, setup and dismantling of itor Badges. If more than fo	exhibits, and electrical cooper are needed, they will n	onnections. eed to register	
Company				
Exhibitor (if different)				
Address				
(street)	(city)	(state)	(zip code)	
Authorized by:	E-mail			
Signature	Dat	e		

Please enclose two (2) signed copies of this contract, one of which will be returned to you upon acceptance by the Allied Social Science Associations.

## ALLIED SOCIAL SCIENCE ASSOCIATIONS

2014 BROADWAY, SUITE 305 NASHVILLE, TN 37203 615-322-3509 PHONE, 615-343-7590 FAX

## INSERTION ORDER - ASSA PRINTED PROGRAM

Specifi	cations:	Black and wh Press quality Resolution: 3 Electronic fil Send to: laura	PDFs 00dpi			
Size Ro	equirements:	Type area	Full page, (4-1/8" X 7-3/8") Half page (horizontal only), (4-1/8" X 3-1	/2")		
Closin	g Date for Ads:	October 3, 2	2018			
Rates:	Full page Each additiona Half page	ıl full page		\$1,250 \$1,100 \$1,000		
	Page facing co Cover three Cover four	ver three	These three pages are being auctioned off. Please send in your bid by August 15, 2018.	\$1,30 \$1,40 \$1,70	00	
NOTE	: All charges are	e net; no cash o	or agency discount allowed.			
Reserv	e the following	space in the 20	19 ASSA Program:			
	Check enclose	ed. Please make	check payable to <b>ASSA</b> .			
	Bill us after the publication.					
		**Prep	payment is required all foreign advertisers**	k		
COMP	ANY (for whom	ad is being place	ed)			
CONT	ACT NAME		E-mail			
ADDR						
	Street		City	State	Zip code	
PHON]	Е		FAX	DATE		

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\*\*For security reasons, we can no longer accept credit card payment via e-mail.

Please fill out the form below with your payment information and fax to 615-343-7590\*\*

Visa	MasterCard	American Express	Discover	
CREDIT CAI	RD NUMBER		CSC CODE	
CARDHOLD	DER'S NAME			
CREDIT CAI	RD EXPIRATION DATE			
AUTHORIZE	ED SIGNATURE:			
AMOUNT PA	AID: \$			
COMPANY (	(for whom ad is being place	d)		
CONTACT N	NAME	E-	mail	
ADDRESS _				
S	Street	City	State	Zip code
PHONE		FAX	DATE	