SCAI **TRIP**

Transradial Interventional Program Series

EXHIBIT APPLICATION

Miami Beach, FL • September 27, 2014
Los Angeles, CA • November 15, 2014
Atlanta, GA • January 24, 2015

CONTACT & COMPANY INFORMATION

Name: _____

Mailing Address: _____

Phone: _____ E-mail: _____ Fax: _____

The following information will be included in the final program and/or on-site signage.

*Company Name: _____ *Website: _____

*Company Mailing Address: _____

*Company Description: *Applications will not be processed without a company description. Email your company description (maximum of 50 words) to Exhibitors@SCAI.org.*

EXHIBIT SPACE FEE

Exhibit fee must be received by application deadline to be recognized in the SCAI Transradial Interventional Program (TRIP) final program and on-site signage. An electornic Exhibitor Kit will be sent to the company contact above once SCAI receives payment and a company description.

Exhibit Space Includes: One complimentary exhibitor registration, a 6 ft. x 30 in. skirted tabletop and two chairs in the Exhibit Hall of the selected TRIP Program.

TRIP Miami • Sept. 27, 2014

Fontainebleau Miami Beach

Application & Payment Deadline: Aug. 27, 2014

❒ **1 Day Tabletop Space .. $1,500**

TRIP Los Angeles • Nov. 15, 2014

Omni Los Angeles Hotel at California Plaza

Application & Payment Deadline: Oct. 15, 2014

❒ **1 Day Tabletop Space .. $1,500**

TRIP Atlanta • January 24, 2015

Marriott Atlanta Marquis

Application & Payment Deadline: Dec. 24, 2014

❒ **1 Day Tabletop Space .. $1,500**

STATEMENT OF LIABILITY: We / I agree to abide by all the requirements, restrictions, and obligations for the SCAI Transradial Interventional Program Series. We / I assume the entire responsibility and liability for losses, damages, and claims arising from injury or damage to our / my displays, equipment, and other property brought upon the premises of Fontainebleau Miami Beach, Omni Los Angeles Hotel at California Plaza, or Marriott Atlanta Marquis and shall indemnify and hold harmless the agents and employees of the Fontainebleau Miami Beach, Omni Los Angeles Hotel at California Plaza, or Marriott Atlanta Marquis enter, the SCAI Transradial Interventional Program Series, and SCAI from any and all such losses, damages, and claims.

PAYMENT & EXHIBIT INFORMATION

Payment must accompany this application or it will not be processed.

Amount Paid: $ _____ Payment Method: ❒ Check #: _____ *(Payable to SCAI)* ❒ Mastercard ❒ American Express ❒ Visa

Credit Card #: _____ CCV #: _____ Exp. Date: _____

Name on Card: _____ Signature: _____

CANCELLATION POLICY: Cancellation of SCAI Transradial Interventional Program (TRIP) exhibit space must be made in writing and will be effective the date such notice is received in the SCAI office. SCAI's cancellation policy will apply as follows: **TRIP Miami:** (1) On / before After August 27, 2014: 50% of contracted fee*; (2) After August 27, 2014: No refund; **TRIP Los Angeles:** (1) On / before October 15, 2014: 50% of contracted fee*; (2) After October 15, 2014: No refund; **TRIP Atlanta:** (1) On / before December 24, 2014: 50% of contracted fee*; (2) After December 24, 2014: No refund. Refunds are subject to a $50 processing charge and will be mailed within 8 weeks after the meeting.

*By signing this, I state that I am hereby authorized to reserve space for our / my use in the technical exhibit area of the SCAI Transradial Interventional Program Series to be held in one of the following venues:

- September 27, 2014 at the Fontainebleau Miami Beach
- November 15, 2014 at the Omni Los Angeles Hotel at California Plaza
- January 24, 2015 at the Marriott Atlanta Marquis

Signature: _____ **Date:** _____

MAIL
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Washington, DC 20036

FAX
(866) 733-2576

ONLINE
www.SCAI.org/TRIP

QUESTIONS?
Call (800) 992-SCAI