



Eastern Allergy Conference

** Application and Contract for Exhibit Space **

May 30 – June 2, 2024
The Breakers, Palm Beach, Florida

Eastern Allergy Conference, 450 Veterans Memorial Parkway, Bldg. 15, East Providence, RI 02914

Tax ID #: 05-0515560 (501c3)

The information in this section will appear in all printed materials. Please be exact.

Company Name _____

Street Address _____

City/State/Zip _____

Phone (Company's main number)/Fax/Web site _____

Space confirmation and other information should be mailed to:

Name _____

Address _____

Telephone number (of contact person) _____

Please Reserve Fully Furnished _____ 8 X 6 Exhibit Table \$4,500.00
_____ 8 X 6 Exhibit Table Premium Position \$5,500.00
_____ 16 X 6 Exhibit Table \$7,000.00

The following specifics apply to our exhibit:

_____ We require _____ standard electrical outlet(s) _____ We do not require electricity

\$_____ full payment is enclosed. Make check payable to Eastern Allergy Conference

Credit Card # _____ Exp _____ Signature _____

Names for badges: _____

We understand and agree to follow policies of the STANDARDS FOR COMMERCIAL SUPPORT OF CONTINUING MEDICAL EDUCATION in support of the Eastern Allergy Conference.

Authorized Signature _____ Title _____ Date _____

FAX THIS FORM BACK TO 401-331-0223

www.easternallergyconference.org