



Eastern Food Allergy and Comorbidity Conference

Palm Beach, Florida

January 8 – 11, 2026

easternfoodallergyconference.org

**** Application and Contract for Exhibit Space ****

Eastern Food Allergy & Comorbidity 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 _____ 10 X 10 Exhibit Table \$4,000.00
_____ 10 X 10 Exhibit Table Premium Position \$5,000.00
_____ 20 X 10 Exhibit Table \$6,500.00

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 Food Allergy & Comorbidity 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 Food Allergy & Comorbidity Conference.

Authorized Signature _____ Title _____ Date _____

FAX THIS FORM BACK TO 401-331-0223