



RIA's 65th ANNUAL CONVENTION & EXHIBITION
 Hyatt Regency Atlanta on Peachtree Street ♦ Atlanta, GA
 Dates of Exhibition: March 24 – 26, 2010

2010 CONVENTION - EXHIBITOR BOOTH SPACE CONTRACT

1. CONTACT INFORMATION

Company Name		Date
Exhibitor Contact (receives all exhibit correspondence)		Title
Contact's Email		Phone
Mailing Address		Fax
City	State	Zip/Postal Code

2. BOOTH TYPES AND PRICES

QUANTITY	BOOTH TYPE	2009 CONV EXHIBITOR – ONLY (50% deposit due by 3/13/09)		Pricing through 1/8/10		Pricing after 1/8/10	
		MEMBER	NON-MEMBER	MEMBER	NON-MEMBER	MEMBER	NON-MEMBER
	Corner (8x10)	SPECIAL PRICES NO LONGER AVAILABLE		\$1,700	\$2,050	\$1,900	\$2,250
	Inline (8x10)			\$1,500	\$1,850	\$1,700	\$2,050
	10x20 Peninsula			\$3,200	\$3,450		
	20x20 Island			\$6,150	\$6,500		

3. BOOTH PREFERENCE

BOOTH CHOICES:	1 st	2 nd	3 rd	4 th	5 th
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Please AVOID the following competitors:

4. BOOTH PAYMENT

AMOUNT PAID: \$ _____	<input type="checkbox"/> 50% Deposit	<input type="checkbox"/> 100% Paid in Full
<input type="checkbox"/> Check (made payable to RIA)	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard <input type="checkbox"/> American Express (Security code _____)
Credit Card # _____	Exp. Date _____	
Name on Card _____	Signature _____	

Please reserve exhibit space on the official floor plan for our use during RIA's 65th Annual Convention & Exhibition, March 23-27, 2010 as requested above. We acknowledge that we have read the Exhibit Terms and Conditions and understand that this space is subject to those terms and conditions. We understand that upon approval by RIA, this serves as a binding agreement between our company and RIA. A 50% deposit must accompany each contract in order to receive a booth assignment. Requests for cancellations of exhibit space must be presented on company letterhead in writing. If a cancellation occurs before October 30, 2009, the exhibitor will receive a full refund less a \$150 administrative fee. If cancellation occurs after October 30, 2009 but before January 8, 2010, exhibitors will receive a 50% refund of their booth fee. No refunds will be given after January 8, 2010 under any circumstances.

Signature _____ Date _____
 Print Name _____ Title _____

RETURN CONTRACT/PAYMENT TO: RIA, 9810 Patuxent Woods Dr., Suite K, Columbia, MD 21046 OR Fax to 443-878-1010.

RIA OFFICE USE ONLY	Date Paid:	# of Booths:	Booth(s) Assigned:
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