

EXHIBITOR APPLICATION & CONTRACT

December 6-7, 2023 | Atlantic City, NJ

Save \$\$: Register Online and Pay in Full by July 31, 2023 and SAVE!

EP Henry an Oldcastle APG Company (hereinafter referred to as Management) is hereby authorized to reserve space for the use of (Exhibitor) _____ for MAHTS® 2023.

FEES: The undersigned agrees that assigned space will be reserved for MAHTS 2023. The booth rental payment in full must be received along with a completed Application & Contract form to secure a booth assignment. **EXHIBIT SPACE WILL NOT BE ALLOCATED WITHOUT CONTRACT AND PAYMENT.** No refunds will be given for cancellations.

	Advance - by October 31st	Standard - After October 31st
10x10 Inline Booth	\$1,800	\$2,000
10x10 Corner Booth	\$2,050	\$2,250

SAVE \$\$: Reserve 300 square feet or more of booth space and receive a 10% discount.
Reserve 700 square feet or more of booth space and receive a 20% discount.

CERTIFICATE OF INSURANCE: Exhibitors are required to provide EP Henry with a certificate of liability insurance covering your participation in MAHTS 2023. Certificates are to be on file with EP Henry no later than November 3, 2023. Please call your insurance agent and ask that a certificate covering the period from December 4, 2023 through December 8, 2023 to be issued to EP Henry and Oldcastle APG Company naming EP Henry as the certificate holder and an additional insured. Submit certificate to soshea@ephenry.com.

SHOW POLICY: All exhibits must be confined to the booth space assigned to them. Exhibition of any goods other than those manufactured or handled by the exhibitor in the regular course of his/her business is prohibited. No exhibitor may assign or sublet the whole or any part of the space allotted. The undersigned agrees to abide by all policies, requirements, restrictions, and regulations as set forth in this agreement or as may be especially designated by Management, or the facility restrictions. Failure to abide by such policies will result in the forfeiture of all monies paid or due under the terms of this agreement. The Exhibitor cannot assign or transfer this contract. Applications will be accepted or rejected at the sole discretion of EP Henry, for any or no reason. EP Henry will reject any company or product that it believes is not consistent with its policies or objectives and will exclude or require modification of any exhibitor that it considers unsuitable or inconsistent with the character of MAHTS 2023.

Your Booth Package includes:

- One 8'-high curtain backdrop and 33" high dividers and aluminum uprights
- Booth ID sign listing the Company Name and Booth #
- Two (2) booth personnel badges per 10x10 booth space (additional \$50 per person)
- Carpet in the aisles of the Event
- Online portal to build your company profile, promoting your presence at the show in advance of the show
- Cocktail Reception in the exhibit hall on Wednesday
- Distributor Program
- Buffet lunches on Wednesday and Thursday – **NEW!**
- Your company listing in MAHTS Mobile App – **NEW!**

Total number of 10'x10' booths requested: ____ Corner ____ Inline Location Preference: _____

List of vendors/manufacturers you would NOT like located in your vicinity: _____

Product to be exhibited: _____

Sale of product / Services to (Check all that apply): ____ Distributor ____ Attendee ____ Others: (please specify) _____

Please contact me to discuss opportunities for: Sponsorship YES ____ NO ____ Advertising YES ____ NO ____ Education YES ____ NO ____

Upon acceptance by EP Henry, this application, including the space assignment and policies as set forth, will constitute a contract between the Exhibitor and Management. If you have any questions regarding the show, please call Sally O'Shea at (610) 544-5775 or email soshea@ephenry.com. Note: Personnel registration will be collected under separate cover.

ACCEPTANCE: (Must be completed and signed)

YES, PLEASE SIGN US UP FOR MAHTS 2023

Company Name: _____

Mailing Address: _____

City, State, Zip Code, Country: _____

Telephone #: _____ Fax #: _____

Company E-mail: _____ Company Website: _____

Main Contact Person: _____ Title: _____

Cell Phone #: _____ Email: _____

PAYMENT METHODS:

EP Henry will accept the following methods of payment: ____ VISA ____ MasterCard ____ American Express ____ Check (payable to EP Henry)

Amount \$ _____ Date Received _____ Check # _____

Card # _____ Expiration Date: _____ Auth # _____ Zip Code: _____

Name on Card: _____ Signature: _____

Please submit application and payment to: Online: www.MAHTS.com Email: soshea@ephenry.com

EP Henry – 201 Park Avenue - Woodbury, NJ 08096

By signing below, I certify that I have read, understand, and comply to agree with all rules and regulations of MAHTS 2023:

Signature: _____ Date: _____