CALIFORNIA PSYCHIATRIC ASSOCIATION

2010 PREMIER CONFERENCE

October 8-10, 2010
(Exhibits October 8-9, 2010)

La Quinta Resort and Club

Exhibit/Sponsorship Reservation/Statement/Contract Form

COMPANY	PHONE	FAX
CONTACT		
TITLE	PHONE	
STREET ADDRESS	FAX	
CITY/STATE/ZIP	EMAIL	
AT-SHOW CONTACT	PHONE	EMAIL

This form is designed to serve as your reservation for exhibit space and your statement/invoice for submission to your accounts payable department. If a separate statement is required, please contact the California Psychiatric Association at 916.442.5196.

Payment must be received to confirm your reservation. All checks written for exhibit space or event sponsorship must be made payable to California Psychiatric Association.

Please complete both sides of this form (registration, electrical, telephone) indicating n/a where appropriate, and return the completed form to:
California Psychiatric Association • 1400 K Street, Ste. 302 • Sacramento, CA 95814

☐ Exhibit Space(s) $ _____
We understand that the cost of the exhibit space is $3000 per 8' x 10' space with pipe and drape, and includes 1-table, 2-chairs, 1-wastebasket, booth signage, conference registration, Legislative Luncheon and receptions for four (4) exhibit staff people, listing in the conference exhibitors guide and special recognition in the Scientific Meeting Syllabus and the Association's newsletter.

☐ Electrical Service - 500 watts, $50 $ _____

☐ Event Sponsor - We would like to sponsor the following event(s):
- ☐ President's Reception - $2500 $ _____
- ☐ Saturday Awards Reception in Exhibit Area - $3,000 $ _____
- ☐ Continental Breakfast in Exhibit Area - $1500 $ _____
- ☐ Refreshment Break in Exhibit Area - $1000 $ _____

TOTAL $ 0.00

Registrants:

Name _____ Phone # _____ Email _____

_____ _____ _____

_____ _____ _____

_____ _____ _____

Booth Sign - Please indicate how you want your booth ID sign to read:

_____

Electrical Requirements - Please describe your electical needs

Telephone Requirements - Please describe the specific requirements for telephone service at your display booth:

Miscellaneous Requirements - If there is an exhibitor you do not want to be next to, please indicate:

Please describe in detail any special requirements you have for your display area:

Exhibitor's Package:

Upon receipt of your reservation for display space, you will be sent an exhibitor's package which will include exhibit schedules, order forms for special booth furnishings, shipping instructions and information which will assist you in making arrangements for your exhibit at the conference. Please indicate to whom you would like the exhibitor's package sent:

Name _____ Phone/Fax_____

Street Address _____ Email address _____

City/State/Zip _____

Hold Harmless Agreement:

In consideration for the use of space provided by La Quinta Resort & Club and participation in the 2010 California Psychiatric Association Premier Conference through arrangements made by Executive Events and Management Company, the above-named company hereby holds harmless the California Psychiatric Association, Executive Events and Management Company and La Quinta Resort & Club, their agents and employees, for any loss, damage or injury resulting from participation by the above-named company in the above-named conference to be held October 8-10, 2010.

_____ _____

Signature of Authorized Representative Date

For further information regarding conference events, sponsorships, payment, conference agenda or other details, contact:	For further information regarding physical aspects of your exhibit participation at this conference, please contact:
Lila Schmall, CPA Associate Executive Director California Psychiatric Association • 916-442-5196 lila-schmall@calpsych.org	O.J. Sutherland • Executive Events 530-345-8593 • oj@execevents.com