

SERMACS2002 BOOTH APPLICATION FORM
November 13th – 16th, 2002

I (we) agree to abide by the EXPOSITION RULES AND REGULATIONS (included in this packet) and I (we) also hereby apply for exhibition space on Nov. 14th and 15th at the Southeast Regional ACS Meeting, Lightsey Center, Charleston, South Carolina, November 13th – 16th, 2002.

Manned Booths are \$650 each. After August 15th, 2002, manned booths are \$700 each.

Unmanned Booths are \$450 each. After August 15th, 2002, unmanned booths are \$500 each.

Manned Booth Only: Unmanned Booth Only: Either Manned or Unmanned Acceptable:

First choice: Booth _____ Second choice: Booth _____

Third choice: Booth _____ Fourth choice: Booth _____

If you desire more than one contiguous booth, list all booths desired as one single choice.

Internet Access Requested: Dial up Modem Requested (booths 12-14 only):

It is understood and agreed that SERMACS2002 will endeavor to assign space in order of choice. If all spaces selected have been previously assigned, the Exhibits Chair reserves the right to assign space as equitably as possible in accordance with the stated exhibitor preference for manned or unmanned exhibits.

For the benefit of promotion and publicity of the Exposition, I (we) authorize SERMACS2002 to use the following description of the products and/or services to be exhibited: (Please limit to 50 words. The Exhibits Chair reserves the right to edit for style.)

Please complete Application and Contract below:

Company: _____

Address: _____

Telephone: _____

By: _____ /s/

Title: _____

Name of person to receive further
correspondence: _____

Send completed form to:

Dr. Thomas A. Dix, Exhibits Chair,
Department of Pharmaceutical Sciences
Medical University of South Carolina
Charleston, SC 29425

PHONE: (843) 876-5092 FAX: (843) 792-0759

E-MAIL: dixta@musc.edu

Do not write in this space.

Assigned booth(s) # _____

Approved by _____

Date of Approval _____

Payment by: Check VISA AMEX Master Card

Credit Card No: _____

Expiration Date: _____

**PLEASE MAKE CHECKS PAYABLE TO:
SERMACS2002.**

Your copy of the completed form will be returned to
you immediately upon acceptance.

This completed form constitutes a binding
agreement between the Exhibitor and the
Southeast Regional ACS Meeting.

Names of Exhibitors For Badges:

