



EXHIBIT SPACE APPLICATION

Please complete and submit both pages of the Exhibit Space Application.

INSTRUCTIONS: Please type or print your information in all sections of this application. Keep a copy for your records. Return all other copies with your 50% deposit (if submitted by August 25, 2017). Full payment of total exhibit cost is required if submitted on or after August 26, 2017. MAKE CHECK PAYABLE in U.S. Funds to the **Automotive Recyclers Association**. MAIL TO: Automotive Recyclers Association, c/o AWARD WINNING EVENTS, 396 Clarkston Drive, Smyrna, TN 37167

COMPANY INFORMATION AND CONVENTION PROGRAM GUIDE EXHIBITOR LISTING

All exhibitors in ARA's 74th Annual Convention and Exposition will receive one FREE listing in Automotive Recycling magazine's special feature issue on Exhibitors and Suppliers plus one FREE listing in the 2017 Convention Program Guide. Please list the following information EXACTLY as you wish it to appear in these publications. Organizations renting multiple booths will receive one listing. Submission may be edited for conformity. The DEADLINE for inclusion in the Automotive Recycling magazine Exhibitors and Suppliers issue is August 30, 2017. The DEADLINE for inclusion in the Convention Program Guide is SEPTEMBER 27, 2017.

PLEASE PRINT CLEARLY AND LEGIBLY OR TYPE YOUR ENTRY.

Please Check One: ARA Member Non-member Non-Member joining now*

Company Name _____

Address _____

City/State/Province _____ Zip/Postal Code _____ Country _____

Company Website _____

Business Phone# _____ Toll-Free# _____ Fax# _____

Contact _____ Title _____ E-mail _____
(to be listed in Magazine and Convention Program)

Contact _____ E-mail _____ Number of Booth Personnel _____
(for exhibit materials)

List Names for Badges _____

Provide a complete description of your company, services and/or products as you wish it to appear in publications (Limit 50 words)

Use description from 2016

SPACE PREFERENCES: Wherever possible, ARA will make every effort to honor your space preference. Exhibit space is assigned on a first come, first served basis, pending proper completion of this Exhibit Space Application.

1st choice: _____ 2nd choice: _____ 3rd choice: _____ 4th choice: _____

If possible, we do not wish to be next to or directly across the aisle from the following companies.

1) _____ 2) _____

3) _____ 4) _____



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SPACE COST: This application MUST be received with 50% deposit of total amount due (if submitted by August 25, 2017). Full payment required for all applications received on or after August 26, 2017 before space is considered.

PLEASE CHECK ONE, INDICATE NUMBER OF BOOTHS DESIRED, THEN MULTIPLY BY FEE

<input type="checkbox"/> ARA Member	Number of 10' x 10' booths / Marsalis Hall	_____ x \$1,795	= \$ _____
	Number of 10' x 10' booths / Cumberland Hall	_____ x \$1,695	= \$ _____
<input type="checkbox"/> Non-member	Non-member surcharge (per 10x10 booth)	_____ x \$200	= \$ _____
	Corner Booth Surcharge	_____ x \$ 250	= \$ _____
	End Cap or Island Booth Surcharge	_____ x \$ 600	= \$ _____
	Exhibitor Booth Furniture Package	_____ x \$ 195	= \$ _____
	Additional Booth Personnel <i>(3 FREE per 10x10 booth space)</i>	_____ x \$ 200 <i>per person</i>	= \$ _____
	Upgrade badge to attend all sessions	_____ x \$ 75 <i>per person</i>	= \$ _____
SOCIAL EVENTS			
Wednesday, November 1	Networking Night @ <i>Crashed Toys</i>	_____ x \$ 45	= \$ _____
Thursday, November 2	Spouse Tour: <i>Makeover & Fashion Show</i>	_____ x \$ 25	= \$ _____
Friday, November 3	Spouse Tour: <i>Stainless Steel Chef Competition</i>	_____ x \$ 75	= \$ _____
Friday, November 3	Awards & Networking Dinner	_____ x \$ 95	= \$ _____
Saturday, November 4	Texas Time: <i>American Auto Salvage & Stockyards</i>	_____ x \$ NC*	= \$ _____
		<i>*but you must indicate your participation</i>	
Sunday, November 5	AAA Texas 500 Event: <i>Ticket, Tailgating, and Transportation</i>	_____ x \$ 95 <i>per person</i>	= \$ _____
TOTAL AMOUNT DUE:			\$ _____

50% Deposit due before 08/25/17; FULL PAYMENT must accompany application on or after 08/26/17

PLEASE READ AND SIGN HERE

I / We agree to abide by all rules and regulations governing the Exposition as printed within the Exhibitor Prospectus which are a part of this application. Acceptance of this application by Show Management constitutes a contract. IMPORTANT: Keep a copy for your records.

Signature _____ Date _____

Name (type or print) _____

Method of Payment Check enclosed (U.S. Funds) Check No.: _____ VISA MasterCard American Express

Credit Card # _____ Expiration Date _____ Security Code _____

Name on Card _____

Signature _____

Photocopy both sides of the Exhibit Space Application for your records, and return BOTH sides to:

ARA c/o Award Winning Events, 396 Clarkston Drive, Smyrna, TN 37167 ATTN: Kim Glasscock

- or - Email digital file forms to: kim@a-r-a.org **QUESTIONS?** Email : kim@a-r-a.org Or call : (615) 223-6656