



# Table Rock Regional Roundup

APPLICATION FOR EXHIBIT SPACE  
September 27-29, 2018  
Big Cedar Lodge, Ridgedale, MO

(Please complete both sides) (Can be completed online at [www.TableRockRoundup.org](http://www.TableRockRoundup.org))

**Exhibiting Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Personnel who should receive exhibit confirmation materials:**

Note that all materials will be sent via email.

Primary Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_ # of Representatives Attending Friday Night Dinner (advance reservations required)

**Exhibit Opportunities**

- |                          |  |          |
|--------------------------|--|----------|
| <input type="checkbox"/> | <b>In-Line Exhibit Booth</b> (8' x 8' booth space)                     | \$ 2,000 |
| <input type="checkbox"/> | <b>In-Line Exhibit Booth</b> (10' x 10' booth space)                   | \$ 2,100 |
| <input type="checkbox"/> | <b>Premium Exhibit Booth</b> (#E1-E2, #E3-E4 - 16' x 6' premium space) | \$ 3,800 |

**Booth # preference:** 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

Website to be linked: \_\_\_\_\_

**Description of Product/Service:** \_\_\_\_\_

**List firms you do NOT wish to be in close proximity to** \_\_\_\_\_

**Payment Options**  Check payable to Table Rock Regional Roundup

or  Circle one: VISA/MC (we do not accept AMX)

Name on card: \_\_\_\_\_ Security code: \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

***Please complete both sides...***

## Exhibitor Terms & Conditions

**Exhibits:** Exhibits are provided by the Table Rock Regional Roundup (TRRR), a joint venture of the Arkansas Ophthalmological Society, Kansas Society of Eye Physicians & Surgeons, Missouri Society of Eye Physicians & Surgeons and Oklahoma Academy of Ophthalmology.

**Control of Hall, Program and Schedule.** Exhibitors agree that sole control of the Exhibit Hall, conference room, and conference schedule lies with the TRRR, and further that times listed are tentative and subject to change.

**Payment Deadline:** Exhibits are available on a first come, first served basis based upon date payment is received. Once the exhibit area is sold out, companies have the option of being on a wait list in the event that another company cancels. Upon acceptance, TRRR will provide exhibit space as outlined in the Exhibitor Regulations. Payment in full is due by September 1, 2018, or TRRR has the right to cancel exhibitor's application. It is not necessary to send payment with this application form, but payment must be received by September 1, 2018.

**Cancellation Deadline:** Cancellations received prior to September 1, 2018, shall be eligible for a 50 percent refund of exhibit fees. Cancellations received on or after September 1 will be non-refundable. All exhibit cancellations must be made in writing to TRRR. No-shows will not be refunded. TRRR does not guarantee number of attendees.

If after the contract is entered into, the TRRR fails or is unable to provide an Exhibitor with the opportunity to exhibit at the TRRR conference, due to fire, strikes, authority of the law, act of God or any other cause or reason, and the Exhibitor is not responsible for such failure, the Exhibitor's sole and exclusive remedy shall be the return of monies that it has paid in connection with the Application/Contract. In such case, the TRRR shall bear no further liability or responsibility under such agreement.

**EXHIBITOR AGREES TO BE RESPONSIBLE FOR HIS/HER OWN PROPERTY. EXHIBITOR SHALL RELEASE AND HOLD HARMLESS AND INDEMNIFY THE TABLE ROCK REGIONAL ROUNDUP JOINT VENTURE FROM ANY AND ALL CLAIMS, OBLIGATIONS, LIABILITIES, CAUSES OF ACTION, LAWSUITS, DAMAGES, AND ASSESSMENTS, INCLUDING LEGAL FEES THAT RESULT FROM AN ALLEGATION OF NEGLIGENCE ON THE PART OF THE EXHIBITOR OR TABLE ROCK REGIONAL ROUNDUP JOINT VENTURE OR THIRD PARTIES IN THE USE OF THE EXHIBIT SPACE OR ACTIVITIES IN CONNECTION WITH THE USE OF EXHIBIT SPACE.**

**Acceptance of Application:** Acceptance of this application as an agreement between the Exhibitor and the TRRR will occur only when an official confirmation has been sent by the TRRR. It is understood that disapproval of an Exhibitor, per the terms outlined in the Exhibitor Regulations, will result in termination of the agreement without penalty to either party.

**Exhibitor Regulations Agreement:** The undersigned acknowledges and agrees to these Exhibitor Terms and Conditions.

**Warrant of Authority:** The Exhibitor and person signing this application on its behalf represent and warrant that the undersigned person is a duly authorized and appointed agent of the Exhibitor, is fully empowered to bind the Exhibitor to all provisions contained in this agreement.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this application with any payment (checks made payable to Table Rock Regional Roundup) to:**

Oklahoma Academy of Ophthalmology  
401 W. 15th St, Ste. 825  
Austin, TX 78701

Phone: 512-370-1549; Fax: 512-370-1637; exhibits@TableRockRoundup.org

**Table Rock Regional Round Up Tax ID: 26-4184333**