

**EXHIBIT SPACE CONTRACT**  
**NATURAL PRODUCTS EXPO EAST 2019**



Baltimore, MD USA  
 Education: Wed.-Sat., September 11-14, 2019  
 Trade Show: Thurs.-Sat., September 12-14, 2019

**PLEASE RETURN ORIGINAL  
 CONFIRMATION WILL BE RETURNED**

Produced by New Hope Network ("NHN" or "Show Management"), a division of Informa Media, Inc. ("Informa Media" f/k/a/ Penton Media, Inc.).

Please include invoice # and customer # on check stub or wire transfer

Make checks payable to: **Wire Transfer:** **Express Mail Address:**  
 Informa Media Informa Media JPMorgan Chase  
 24654 Network Place JPMorgan Chase 131 S. Dearborn, 6th Floor  
 Chicago, IL 60673-1246 New York, NY Chicago, IL 60603  
 ABA #021000021 Attn: Informa 24654  
 Account #811104744  
 SWIFT: CHASUS33

**CREDIT CARD:**

To pay by credit card, your company will be invoiced with directions on how to pay online.

By completing and returning this contract, the company identified below ("you" or "exhibitor") is applying for exhibit space at NATURAL PRODUCTS EXPO EAST 2019 (the "Show"). Upon written confirmation of acceptance by NHN and assignment of exhibit space, this contract shall become effective and form a binding agreement between you and NHN governing the non-assignable license granted to you to use exhibit space for the Show. The agreement formed incorporates (i) the terms and conditions set forth below on this contract form and the Additional Terms and Conditions (accessible at [www.expoeast.com/terms](http://www.expoeast.com/terms)); (ii) the terms, conditions, rules, regulations and guidelines set forth in the Exhibitor Services Kit (accessible at [expoeast.com](http://expoeast.com)); (iii) the New Hope Network Exhibitor Standards for Natural Products Expo ([newhope.com/standards](http://newhope.com/standards)); and (iv) all additional policies and directives ("Policies") published or provided by Show Management relating to the Show (collectively, the "Agreement"). The foregoing shall control in the following order of priority to the extent there is any direct conflict between or among them: first, the Terms and Conditions, second, the Exhibitor Services Kit, third, the Standards, and fourth, the Policies. NHN reserves the right to reject any application for exhibit space for any reason.

**BOOTH PRICING:**

7,8, 9 or 10 x 10	In-Line	\$5,640/\$5,200 OTA members*
Premium	Corner	\$6,640/\$6,200 OTA members*
Custom	Peninsula	\$73.43/sq. ft. \$68.96/sq. ft. OTA Members*
Custom	Island	\$76.63/sq. ft. \$72.15/sq. ft. OTA Members*
5 x 10		\$3,190

\* Organic Pavilion only

**★\$185\*\*International Exhibitor Insurance (Required)** All

international exhibitors (defined as non-U.S. and non-Canadian exhibitors) are required to obtain insurance through Exhibitorinsurance.com, the Show's designated insurance provider and the cost will be added to all international exhibitor contracts. This fee will be waived/refunded to international exhibitors if a valid Certificate of Insurance with the required coverages is provided to and approved by Show Management. U.S. and Canadian exhibitors may purchase the required insurance through their own carriers or through Exhibitorinsurance.com.

**PAYMENT TERMS**

**Exhibit Space:** Forty percent (40%) of the total fee for the exhibit space is due by 10/26/18. The balance is due on 05/03/19. Applications received on or after 05/03/19 must be accompanied by 100% of the fee and must be paid by cashier's check or money order. (100% of the fee for event marketing and/or sponsorships is due with the applicable contract, unless otherwise indicated therein.) NHN may, at its discretion, release the exhibit space if the deposit(s) are not made in accordance with the payment schedule. Reassignment of exhibit space due to missed or late payment does not relieve exhibitor of its obligations under this Agreement.

**CANCELLATION POLICY**

Once this contract form is signed by you and exhibit space is allocated to you by NHN, you are contracted to exhibit space. An exhibitor that cancels or downsizes its exhibit space reservation must pay a cancellation fee, as specified below. Cancellations must be made in writing and are subject to the following:

- 1) Cancellations and booth downsizes received before 05/03/19 are subject to a cancellation fee equal to 40% of the booth price.
- 2) Cancellations and booth downsizes received on or after 05/03/19 are subject to a cancellation fee equal to 100% of the booth price.
- 3) Cancellations and booth downsizes will receive one (1) penalty point against exhibitor's priority points (see [expoeast.com/prioritypoints](http://expoeast.com/prioritypoints)). If Exhibitor has not set up its booth by 6:00 p.m., 9/11/19 and has not contacted the Show Management office at the convention center, NHN reserves the right to reassign exhibitor's booth space.
- 4) Cancellations will result in forfeiture of all exhibitor badges.

**EXHIBIT SPACE** (subject to availability)

The exhibit space rental fee includes standard booth drapery, Exhibitor Services Kit, a listing on the Show Directory Map (print deadlines apply), an online listing on [www.expoeast.com](http://www.expoeast.com) and 6 badges per 10' x 10' booth or 3 badges per 5x10 booth. Also included is admission to all NHN-hosted events and educational seminars unless otherwise noted.

**Assignment of exhibit space:** Booth allocations will begin at Natural Products Expo East 2018 for designated exhibitors and are based on priority points (see [expoeast.com/prioritypoints](http://expoeast.com/prioritypoints)).

**Products to be displayed:**

Organic Pavilion exhibitors agree every product in their booths will be certified organic (Food: minimum 70% organic content; Fiber: minimum 50% organic content) in accordance with the Expo Organic Pavilion Standards ([newhope.com/standards](http://newhope.com/standards)).

**EVENT MARKETING AND SPONSORSHIPS**

For additional promotional opportunities, please complete an Event Marketing or Sponsorship contract (as applicable).

Contact your sales rep for details at 1.866.458.4935

**Product Showcase: \$600** \_\_\_\_\_ Qty.

}	Please select the category(s) and quantity based on your Showcase selection(s)	<input type="checkbox"/> Bulk & Food Service	<input type="checkbox"/> Herbs/Medicinals	<input type="checkbox"/> Vitamin/Supp.
		<input type="checkbox"/> Frozen/Refrigerated	<input type="checkbox"/> Kosher	<input type="checkbox"/> Other
		<input type="checkbox"/> Gluten-Free	<input type="checkbox"/> Lifestyle	
		<input type="checkbox"/> Grocery	<input type="checkbox"/> Organic (certified)	

**Co-exhibitor Listing Policy:** Exhibitors will be allowed one listing per 7, 8, 9, or 10'x10' space purchased. Spaces 8, 9, or 10'x20' and larger will include one exhibitor listing, and one co-exhibitor listing. Exhibitors of spaces 240+ sq. ft.+ may purchase additional listings for \$1,500 each.

**EXHIBITOR CORRESPONDENCE** (One company per contract only)

Online Information & Individual to receive all Expo correspondence.+

Company Name: \_\_\_\_\_

Exhibiting As Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Website: \_\_\_\_\_

Key Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_ Cell Phone #\*: \_\_\_\_\_

**Billing Contact**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

**+ Please proofread** the information in the area above carefully. The Key Contact will have the ability to change the above information online should you choose to publish alternate company information online. A password will be supplied with your exhibit space confirmation via e-mail to the e-mail address listed above. Deadlines apply. Contact name and title will not appear in the online listing\*.

**CONTRACT ACCEPTANCE**

By signing below, exhibitor agrees to abide by the terms and conditions of this Agreement, and hereby represents and warrants that the undersigned is duly authorized to execute this Agreement on behalf of exhibitor.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

**Are you a first-time exhibitor at Natural Products Expo?**  Yes\*\*  No

\*\* If yes, you must complete a new exhibitor application.

**Does your company do business outside the United States?**  Yes  No

**FOR EXHIBITOR USE**

Booth # (s) Assigned: \_\_\_\_\_

= \$ \_\_\_\_\_

Total Size: \_\_\_\_\_

**FOR INTERNAL USE ONLY - Total Due 05/03/19**

Booth # (s) Assigned: \_\_\_\_\_ = \$ \_\_\_\_\_

Total Size: \_\_\_\_\_

Sold By: \_\_\_\_\_

Comp #: \_\_\_\_\_

Total Amt. Due = \$ \_\_\_\_\_

	Date	Initials	Date	Initials
A2Z	_____	_____	ACCT	_____
CONF	_____	_____	INFO	_____