NEW HOPE INNOVATION EXPERIENCE CONTRACT

NATURAL PRODUCTS EXPO EAST 2023





Philadelphia, PA USA Education: Wed.-Sat., September 20 - 23, 2023 Trade Show: Thurs.-Sat., September 21 - 23, 2023 New Hope Innovation Experience Friday, September 22, 2023

PLEASE RETURN ORIGINAL CONFIRMATION WILL BE RETURNED

Produced by New Hope Network ("NHN" or "Show Management"), a division of Informa Media, Inc. (including its subsidiaries and other affiliates directly or indirectly owned by Informa Media Operating Holdings, Inc., "Informa Media").

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

Make checks payable to: Informa Media/NPEE/OHF19 24654 Network Place Chicago, IL 60673-1246 Wire Transfer: Informa Media JPMorgan Chase New York, NY ABA #021000021 Account #811104744 SWIFT: CHASUS33 Express Mail Address: JPMorgan Chase 131 S. Dearborn, 6th Floor Chicago, IL 60603 Attn: Informa Media 24654

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 the New Hope Innovation Experience held at Natural Products Expo East 2023 (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 nonassignable 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) (collectively, "Terms and Conditions"); (ii) the terms, conditions, rules, regulations and guidelines set forth in the Exhibitor Services Kit (iii); the New Hope Network Exhibitor Standards for Natural Products Expo (accessible at newhope. com/standards, the "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.

★\$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 few 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 throughtheir own carriers or through Exhibitorinsurance.com.

PAYMENT TERMS

Exhibit Space: One hundred percent (100%) of fee for ancillary marketing and promotional services is due with contract, unless otherwise indicated. New Hope Network may, at its discretion, release the booth(s) if the deposit(s) are not made per the attached schedule. Reassignment of the booth space under this provision does not relieve the exhibitor of its obligation under this contract.

PLEASE COMPLETE THE FOLLOW	ING			
All opportunities are subject to available	ility.			
OPPORTUNITY			QTY	
INNOVATION EXPERIENCE EXH	IBIT SPACE:			
☐ New Hope Innovation Experience	ce: \$2000*			
		TOTAL:		
*100% payment due with contract				
TABLETOP PREFERENCES:	1			
IADLEIUP PREFERENCES:	1			
	2			
	3			
5'X10' PACKAGE INCLUDES: (1) counter height muslin (or be (2) standard barstools (1) standard trash can (1) 20 Amp Electrical drop, pow Three Badges to Natural Products *Zero badges are included with the	er strip & labor s Expo East* Expo East* is space if the exhibiting comp	any also has a f	ull 3 day Expo East booth.	
EXHIBITOR CORRESPONDENCE (
Online Information & Individual to receive	'			
Company Name:				
Exhibiting As Name:Address:				
City:		7in:	Country:	
Telephone:				
E-mail Address:				
Website:				
Key Contact Name:				
Title:Cell Phone #*				
Billing Contact E-mail				

+ 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.

No refunds will be issued. 100% due with application

FOR INTERNAL USE ONLY Tabletop # (s) Assigned Total Size:	=\$	
Sold By: Date Deposit Rec'd:		Sub-total =\$
Cust# S/0: CK #		Deposit Amt. =\$
Territory:	То	tal Amt. Due = \$