

**NATIONAL CONGRESS OF AMERICAN INDIANS**  
**65th Annual Convention and Trade Show**  
**October 19-24, 2008**  
**Phoenix Convention Center, Phoenix, Arizona**

PLEASE TYPE OR PRINT CLEARLY

EXHIBITOR CONTRACT MAY BE DUPLICATED

**EXHIBITOR CONTRACT**

Contact Person: \_\_\_\_\_

Badge Names (1) \_\_\_\_\_ (2) \_\_\_\_\_  
[Only 2 badges per exhibit space [Additional badges can only be purchased on-site ONLY]

Name of Tribe/ Organization/Corporation: [name as it will appear on signage]  
 \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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

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

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

Convention Registration Fees  
are not included in  
Exhibitor Contract Fees

**BOOTH**

**PAYMENT**

<input type="checkbox"/> \$750 Tribe	<input type="checkbox"/> \$750 Indian Arts & Crafts	<input type="checkbox"/> \$1,800 Corporation
<input type="checkbox"/> \$900 Non-Profit Organization or Educational Institution	<input type="checkbox"/> \$1,000 Tribal Entrepreneur or Tribal Enterprise	<input type="checkbox"/> \$1,800 State/Federal Agency

\_\_\_\_\_ Space [s] X \_\_\_\_\_

**TOTAL:** \_\_\_\_\_

**COVENANT**

This application for exhibit space was made and entered into on this \_\_\_\_\_ day of \_\_\_\_\_, 2007 by and between The National Congress of American Indians, hereinafter referred to as "NCAI," and \_\_\_\_\_, hereinafter referred to as "Exhibitor." Application for space and its acceptance constitutes a contract to use the space assigned. NCAI retains the right to assign and/or change exhibit locations for unavoidable problems of the parties involved. NCAI reserves the right to refuse space to those applicants whose exhibit materials are deemed not to be within the best interests of the Organization. The Exhibitor indemnifies and agrees to hold harmless NCAI and the Phoenix Convention Center, their officers, directors, employees, and agents, from and against any actions, losses, costs, damages, claims, and expenses (including attorney's fees) arising from any damage to property or bodily injury to Exhibitor, his agents, representatives, employees by reason of the Exhibitor's occupancy or use of the exhibition facilities. In accordance with these rules and regulations governing exhibits for the 65th Annual Convention, October 19-24, 2008, the undersigned makes application for exhibit space and encloses the full fee for each space requested.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PLEASE NOTE**

**\*\*\* NEW TRADESHOW SCHEDULE \*\*\***

When signed Exhibitor Contract and PAYMENT is received, you will receive your exhibitor packet from NCAI's designated Trade Show Decorator. This packet will include information on shipping, ordering of electricity, phone lines, etc. Convention expenses are used to defray NCAI operating costs. Therefore, it is NCAI's policy **NOT TO REFUND** Exhibitor Contract fees for any reason including cancellation. Do not mail or fax forms after **September 19, 2008**.

MOVE-IN 1:00 PM - 5:00 PM - MONDAY 10-20-08  
 EXHIBIT HOURS: 9:00 AM - 5:00 PM Daily  
**TUESDAY 10-21-08 through THURSDAY 10-23-08**  
MOVE-OUT AFTER 5:00 PM - THURSDAY 10-23-08  
 [\$75.00 FEE IMPOSED FOR EARLY TAKE DOWN]

**METHOD OF PAYMENT**

**FURTHER INFORMATION**

Enclosed is a check or money order payable to the National Congress of American Indians

[To charge fees to a credit card, FAX this form to NCAI at [202]-466-7797]

VISA  MC  V-Code: \_\_\_\_\_

Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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

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

Contact **Bernida Humetewa**  
 Director of Membership and  
 Exhibition Management at  
 [505]-867-0203 or by e-mail to  
[bhumetewa@ncai.org](mailto:bhumetewa@ncai.org)  
 or visit the website at [www.ncai.org](http://www.ncai.org)

**MAILING INFORMATION**

MAIL PAYMENT TO: **NATIONAL CONGRESS OF AMERICAN INDIANS**  
 1301 Connecticut Avenue NW  
 Suite 200  
 Washington DC, 20036

**EXHIBITOR CONTRACT  
 DEADLINE:  
 SEPTEMBER 19, 2008**

**FOR NCAI STAFF USE ONLY [Please do not write below this line]**

TOTAL PAYMENT RECEIVED: \$ _____	RECEIVED BY: _____
CREDIT CARD AUTHORIZATION NUMBER: _____	DATE: _____
CHECK NUMBER: _____	<input type="checkbox"/> CV <input type="checkbox"/> W