2010 I-X Indoor Amusement Park Exhibit Space Application and Agreement
March 26 – April 18, 2010

Company Name _____

Mailing Address _____ City _____ State _____ Zip _____

Coordinator _____ Phone # _____ Fax # _____

Web Site Address _____ E-mail Address _____

Booth Size	Booth Cost	Booth Size	Booth Cost
10' x 10'	$2,250	20' x 20'	$4,750
10' x 20'	$3,250	20' x 30'	$5,500
10' x 30'	$4,000	20' x 40'	$6,750
10' x 40'	$4,750	Other	Call for pricing

The above price includes a standard space. It is the exhibitor's responsibility to pay all other services and utilities.

Standard Space Includes (per 10′ x 10′): One (1) 8′ Draped Table, Two (2) Chairs, 8′ Back & 3′ Side wall, One (1) Round Trip Move-In/Move-Out Pass & Four (4) Exhibitor Badges (maximum of eight (8), for 10' x 20' and larger booths) and Parking Permits. Additional Exhibitor Badges are $40 each. To order additional services, call I-X Customer Service at 1-800-492-3683.

Payment: **30% deposit of total due upon receipt of signed agreement. The final balance is due by March 15, 2010.** Payment may be made by check or money order, payable to the International Exposition Center, or by charging American Express, MasterCard, Visa or Discover.

Deposit is non-refundable after approval by show management and space is assigned. Payment is refundable only in the event that Show Management is unable to assign exhibit space. It is agreed that the services will be paid for before the opening of the Amusement Park.

***List all products or services to be sold or displayed**. (**Only the items listed may be sold at the event.)**

_____
_____
_____
_____
_____
_____

***FIRST TIME EXHIBITORS MUST PROVIDE A PHOTO OF THEIR BOOTH OR DISPLAY.**

I/We hereby apply for exhibit space in the I-X Indoor Amusement Park. If accepted, I/We acknowledge and abide by the show terms and conditions listed on both pages of this contract, in addition to all I-X Center Building Rules and Regulations.

_____ _____
Exhibitor Authorized Signature **Title** **I-X Center Representative**

_____ _____
Print or Type Name **Date** **Date**

If paying by credit, please complete the following:

☐ **American Express** ☐ **MasterCard** ☐ **Visa** ☐ **Discover**

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Exp. Date** _____

Cardholder Name _____Cardholder Signature_____

Complete this application. Please retain a copy for your own records. Fax to: 216-898-2779
Mail to: I-X Indoor Amusement Park, Laura Hardy, One I-X Center Dr, Cleveland, OH 44135
www.ixamusementpark.com