NBAA2008 EXHIBIT APPLICATION/CONTRACT (ACCEPTANCE AND PLACEMENT ARE SUBJECT TO SPACE AVAILABILITY)

61ST ANNUAL MEETING & CONVENTION
OCTOBER 6, 7, 8, 2008
ORLANDO, FLORIDA

FAX OR MAIL COMPLETED FORM WITH PAYMENT IN FULL TO:
National Business Aviation Association, Inc.
Attn: Margie Morgan
1200 Eighteenth Street NW, Suite 400, Washington, DC 20036-2527
Tel: (202) 783-9369; Fax: (202) 737-4478
E-Mail: mmorgan@nbaa.org

ALL EXHIBITORS MUST BE MEMBERS OF NBAA.

Reserve _____ft by _____ft, which is _____ 10 ft by 10 ft (3.05 m by 3.05 m) Exhibit Space(s), to be used solely by our organization during the NBAA 61st Annual Meeting & Convention, October 6, 7, 8, 2008, in Orlando, FL. If desired Space has already been allocated, NBAA Management is requested to assign the best available Space. If four or more 10 ft by 10 ft (3.05 m by 3.05 m) Spaces are requested, please indicate total dimensions requested (length by width) in spaces below. Exhibitor Booth height:_____ ft.

REQUESTED NUMBER(S):

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____ 4th Choice: _____ 5th Choice: _____ 6th Choice: _____

Exhibitor wishes to be located adjacent to: _____

Exhibitor does not wish to be located adjacent to: _____

Exhibitor will be sharing Exhibit Space with the following Companies (Co-Exhibitors): _____

Although it is NBAA's intent to place Exhibitors in their requested Space(s), kindly bear in mind that it may not always be possible. We receive nearly 1,200 requests from Exhibitors requiring Space. It is understood that Exhibitor is responsible for full payment for the amount of Space applied for on this contract.

ALL EXHIBIT SPACE MUST BE PAID IN FULL WITH EXHIBIT APPLICATION. THERE WILL BE NO REFUNDS FOR CANCELLATIONS OR REDUCTIONS IN SIZE AT ANY TIME.

PAYMENT CALCULATION:			
Booth Price:	Multiply $2,395 x _____ (Total number of 10 ft by 10 ft (3.05 m by 3.05 m) Booth Spaces requested) =	Total:	
Non-Members:	Add $395 (applied toward NBAA Membership dues)	Total:	
Discount:	Subtract $50 per 10 ft by 10 ft (3.05 m by 3.05 m) Exhibit Space reserved if contract and full payment is received on or before February 29, 2008.	Total:	
Grand Total due NBAA: Sum of above lines.		Total:	

DISCOUNT: NBAA offers a special discount to Companies submitting Applications and full payment - on a non-refundable basis - on or before February 29, 2008. The discount is $50 for each 10 ft by 10 ft (3.05 m by 3.05 m) Exhibit Space booked. **Exhibitors submitting applications and payments (full or partial) after the February 29, 2008, deadline are not eligible for this discount.**

COMPANY NAME _____ MEMBER # _____

CONTACT _____ CONTACT TITLE _____ CONTACT E-MAIL _____

ADDRESS 1 _____ ADDRESS 2 _____

CITY _____ STATE _____ ZIP/POSTAL CODE _____ COUNTRY _____

PHONE _____ FAX _____ CELL PHONE _____

TYPE OR PRINT – All correspondence relating to the Exhibit should be mailed to:

In signing this application/contract, Exhibitor assumes entire responsibility, and hereby agrees to protect, indemnify, defend and hold NBAA, Orange County Convention Center (OCCC), and Freeman and their respective officers, employees, Members and agents harmless from and against any and all claims, losses, injuries and damages to persons or property, governmental charges or fines and attorney's fees arising out of or caused by the Exhibitor's installation, removal, maintenance, occupancy or use of the Convention premises, or any part thereof, or arising out of or caused by Exhibitor's participation in Convention activities. Furthermore, the Exhibitor agrees to abide by the Rules & Regulations for exhibiting as set forth by the National Business Aviation Association (in its own interpretation) throughout the *2008 NBAA 61st Annual Meeting & Convention Exhibitor Prospectus.*

DATE: _____ SIGNED: _____ NAME OF EXHIBITING COMPANY: _____
(as it should appear on signage and in the *NBAA2008 Show Guide & Directory of Exhibiting Companies.*)

PAYMENT INFORMATION:

Company checks and bank wire transfers are the preferred methods of payment for NBAA2008. **Credit card payments are an accepted form of payment. Payments received in excess of $20,000, however, will be subject to a 3% processing fee.**

❑ **Enclosed is a check in the amount of: $ _____ Check Number: _____**

MAKE ALL CHECKS PAYABLE TO: NATIONAL BUSINESS AVIATION ASSOCIATION, INC.

❑ **Charge my credit card in the amount of: $ _____ Cardholder's Name: _____**

Card Type: ❑ American Express ❑ MasterCard ❑ Visa ❑ Discover

CREDIT CARD NUMBER _____ EXPIRATION DATE _____ SIGNATURE (FOR CREDIT CARD) _____

Bank Wire Transfer Instructions: Bank of America, 730 Fifteenth Street NW, Second Floor, Washington, DC 20005, Tel: (202) 442-3972; Fax: (202) 442-3988; Account Name: National Business Aviation Association, Inc.; Routing #: 026009593; Account #: 2404389; Swift Code: BOFAUS3N. Please indicate on the wire transfer the Exhibiting Company name, invoice number and reference for payment (i.e., Exhibit Space, Static Display Space, Sponsorship, etc.). Please contact the Exhibits Department (Margie Morgan at mmorgan@nbaa.org or Linda Peters at lpeters@nbaa.org) to secure an invoice number prior to making a bank wire transfer.

THE ABOVE APPLICATION IS HEREBY ACCEPTED BY THE NATIONAL BUSINESS AVIATION ASSOCIATION AND THE FOLLOWING EXHIBIT SPACE NUMBER ASSIGNED: _____

Linda A. Peters for NBAA