

Contract & Payment

October 17 – 19, 2010
Mandalay Bay Resort & Casino
Las Vegas, Nevada



CONTRACT & PAYMENT

ON OR PRIOR TO JUNE 25, 2010

Contract must be accompanied by a minimum deposit of 50% of the total cost with the balance due by close of business on July 10, 2010.

AFTER JUNE 25, 2010

Contract must be accompanied by full payment. No contracts will be processed without the required payment.

IMPORTANT INSTRUCTIONS

1. Please clearly print or type.
2. Fill in all sections of the contract that are applicable.
3. Make a copy of both pages of this contract for your records.
4. Make checks payable to:
California Grocers Association
5. Payments made by check or money order must be payable to CGA in U.S. funds and drawn on a U.S. bank. U.S. money orders are preferred. Wire transfers acceptable in U.S. funds. For wiring instructions contact CGA management, 916-448-3545 or toll free 800-794-3545.
6. Mail or overnight original contract with payment to:
California Grocers Association
1415 L Street, Suite 450
Sacramento, CA 95814
Phone: 916-448-3545
Toll Free 800-794-3545
Fax: 916-448-2793
Email: conference@cagrocers.com
Web: www.cagrocers.com

FOR CALIFORNIA GROCERS ASSOCIATION 2010 MANAGEMENT USE ONLY

DATE CONTRACT RECEIVED _____

DATE DEPOSIT RECEIVED AND CHECK # _____

AMOUNT OF DEPOSIT _____

DATE FINAL PAYMENT AND CHECK # _____

AMOUNT OF FINAL PAYMENT _____

BOOTH ASSIGNED _____

RECEIVED BY _____

COMPANY CONTACT INFORMATION

List the company name, address, telephone and fax number where you would like all correspondence to be sent and to be listed in the directory. If you want your materials mailed to someone other than the tradeshow contact listed below, please indicate on a separate sheet.

COMPANY NAME _____

CONTACT NAME _____

ON-SITE CONTACT _____

STREET _____

CITY _____

STATE/PROVINCE _____

COUNTRY _____

ZIP/POSTAL CODE _____

TELEPHONE _____

FAX _____

CELL _____

COMPANY E-MAIL _____

WEB SITE _____

CONTACT E-MAIL _____

SPACE REQUIREMENTS

Minimum booth size: 10' x 10' = 100 sq.ft.

Number of booth's 1 2 3

Exhibit space configuration required: Standard Premium

Our booth preferences are:

1st _____ 2nd _____ 3rd _____ 4th _____

ASSIGNMENT INFORMATION

Your company's priority status for exhibit space selection will be determined by first-come, first-serve basis. Following the previous year's exhibitor priority period, all exhibit space will be assigned on a first-come, first-serve basis. CGA reserves the right to make the final determination of all space assignments in keeping with the best interests of the exhibition.

To assist in the assignment of exhibit space, please list any companies who have product lines competitive with yours, if applicable:

1. _____ 2. _____

3. _____ 4. _____

DIRECTORY INFORMATION

In addition to your alphabetical listing in the 2009 Program Directory, your company name will also be listed under product categories. Please refer to the Product Categories Listing and enter up to six (6) category numbers:

1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

PRODUCTS & SERVICES DESCRIPTION

Please describe, in **35 words or less**, what products and/or services will be displayed in your booth. This information will be used for inclusion with your company description in the Program Directory. **Please TYPE or PRINT clearly**



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EXHIBIT COST

Please read the Contract Terms & Conditions regarding payment for space.

- # _____ of 10x10 booth(s) x \$2,500 = \$ _____ **(Standard-CGA Member)**
_____ of 10x10 booth(s) x \$3,000 = \$ _____ **(Standard-Non CGA Member)**
_____ of 10x10 booth(s) x \$3,000 = \$ _____ **(Premium-CGA Member)**
_____ of 10x10 booth(s) x \$3,500 = \$ _____ **(Premium-Non CGA Member)**

TOTAL EXHIBIT \$ _____

Beth Wright will follow-up to finalize the details of your exhibit booth

STRATEGIC CONFERENCE SPONSORSHIP

My company will sponsor at the 2010 CGA Strategic Conference at the following level:

- Red Level Sponsor—\$5,500
 White Level Sponsor—\$11,000
 Blue Level Sponsor with Business Conference Suite—\$27,500

TOTAL SPONSORSHIP \$ _____

Beth Wright will follow-up to finalize the details of your sponsorship.

*Please note, if you are participating as both a sponsor and an exhibitor, you will receive the benefits at the sponsorship level.

CALIFORNIA GROCER MAGAZINE ADVERTISING

I will advertise in the *California Grocer* Magazine at the following level:

- Full Page 4 Color Advertisement—\$2,800
 Full Page Black & White Advertisement—\$1,900
 Half Page 4 Color Advertisement—\$2,050
 Half Page Black & White Advertisement—\$1,150

TOTAL ADVERTISING \$ _____

Call for more options or volume discounts. Tony Ortega will contact you to finalize the details of your advertisement.

PAYMENT

Total Exhibit \$ _____
Total Sponsorship \$ _____
Total Advertising \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

- Check payable to the California Grocer Association
Tax ID#: 94-0361110

It is important for your company to send your payment promptly with a completed contract as space is limited. Your company's retail request for the Retailer Review Sessions is based upon when CGA received a minimum of 50% of your payment due and a completed contract.

PLEASE SIGN BELOW, AND MAKE A COPY OF BOTH PAGES FOR YOUR RECORDS.

SIGNATURE _____

DATE _____



Direct questions to CGA:

Phone: 916-448-3545 or toll free 800-794-3545

Fax: 916-448-2793

E-mail: conference@cagrocers.com

Web: www.cagrocers.com