



The Catholic Resource Center Presents
The 2010 Catholic Family Conference
 Sunday, July 11, 2010
 Ontario Convention Center—Ontario, California

EXHIBITOR REGISTRATION FORM – PLEASE SUBMIT WITH PAYMENT

Exhibitor Name _____ Representative _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone (____) _____ Fax (____) _____ Email _____
Required Required

Conference Space Prices

| | |
|--|--------------------------|
| One Table | \$295.00 |
| Each Additional Table | \$150.00 |
| Literature Booth (No Sales Allowed) | \$250.00 1 Booth Maximum |
| Total Booths Requested | \$ _____ |
| Total Booth Fees | \$ _____ |

Register early to save money and ensure a great spot. Booth space will be assigned upon receipt of payment. Each Booth includes a 10x10 space, 1 Table & 1 Chair.
 Additional chairs may be obtained for a fee of \$20.00

We ONLY accept Visa, MasterCard or Discover.

Card # _____ / _____ / _____ / _____ / Exp _____ / _____
 Name on card _____ CVC Code _____
 Authorized Signature _____

Applications will not be processed without payment or appropriate product information

The Catholic Resource Center reserves the right to reject and/or pull any and all material that does not adhere to the teachings of the **Magisterium of the Catholic Church during our event**. This also includes any private apparitions not approved by the Church. The Catholic Resource Center reserves the right to pull any exhibitors who have not completed an Exhibitor Registration Form, and not made full payment in accordance with this agreement. **Sub-leasing or sharing of tables is not allowed. Leaving your immediate booth space to distribute any form of promotional product or flyers is strictly prohibited.** In consideration for being permitted to sell, display or distribute material at the *National Catholic Family Conferences* the undersigned exhibitor agrees to assume full responsibility for, and to indemnify and hold harmless, the **Catholic Resource Center** and/or the conference including, but not limited to, the **Catholic Resource Center** officers, directors, agents, representatives, employees, volunteers, and attendees of the conference, from any and all liability, injury, or damage, legal or equitable, to the person or property of the exhibitor or exhibitor's agent. A **15%Registration Processing Fee** will be applied to any cancellations and **no refunds** will be issued after July 18, 2008. The agent signing below is fully authorized to execute this instrument on exhibitor's behalf. If you wish your company name to be listed in the conference program, you must submit your paid registration no later than July 25, 2008. We reserve the right to refuse entry to anyone.

Agent's Signature _____ Date _____

For Additional Exhibitor information please contact Ruben Quezada at 877-526-2151 or by email: ruben@saintjoe.com