

EARLY BIRD EXHIBIT APPLICATION/CONTRACT

Wednesday, March 20 – Thursday, March 21, 2024
Las Vegas Convention Center
Las Vegas, Nevada

Billiard Congress of America 500 Discovery Parkway, Suite 125 Superior, CO 80027 Phone: 303-243-5070

BCAExpo.com

We hereby apply for exhibit space in the BCA Expo 2023, to be conducted on the dates shown above, in partnership with Amusement Expo International. We understand that upon acceptance by Expo Management, this application becomes a contract, under the terms and conditions set forth here and in the Exhibitor Regulations, which we have read, understand and accept. We understand that any change in the information in this contract must be made in writing to Expo Management, and that signing this application indicates that we accept this form to be legal and binding. By completing this Exhibit Application/Contract, we agree and consent to receive all fax and/or e-mail communications and advertisements sent by or on behalf of Expo Management, Expo Contractors and Service Providers.

A. Please indicate preferred booth number/location: Choice: 1st ______ 2nd _____ 4th ______

3. Type of booth space preferred:	Line □ Island □ Peninsula	□ Perimeter
C. Preferred Dimension: Depth	x Width = Total S	quare Feet
). Total Square Foot Booth Cost <i>(25% deposi</i>	it must be submitted with contract before exhibit	space is selected).
Categories 1, 2, 3 BCA Member Submitted after 10/02/23	Category 4 BCA Member Submitted after 10/02/23	Non-BCA Member Submitted after 10/02/23
\$2,395 per 10'x10'booth (# addt'l. booths x \$2,395) \$200 per corner	\$2,695 per 10'x10'booth (# addt'l. booths x \$2,395 \$200 per corner	\$2,895 per 10'x10'booth) (# addt'l. booths \$2,395) \$200 per corner
# booths	# booths	# booths
# corners	# corners	# corners
TOTAL \$	TOTAL \$	TOTAL \$
_	uary 31, 2024. d payment, your credit card will be charged based on to CA Expo. Check # Credit Card	
Name on Credit Card	Deposit Total	
Credit Card No.:	Exp. Date:	Security Code
Address (City, State, Zip) on Credit Card:		
	s on above named credit card and consider this form to EXPO CORRESPONDENCE TO:	
Company Name:	Contact:	
Address:	City, State, Zip: _	
Phone:	Fax:	
Please make a copy of your application for vo	our records. SEND CONTRACT TO SHANE TYREE A	AT SHANE@BCA-POOL.COM

Email:	Web:
<u>Deposits</u>	
Deposits must Contract is sub	be received with the signed Exhibit Space Contract and are non-transferable. When the Exhibit Space omitted:
•	75% of total value of contract due upon signature
•	100% of total value of contract is due 1/31/2024
Failure to mee	t these terms will result in loss of booth selection, and exhibitor is subject to cancellation terms.
Cancellations No refunds for	s & Refunds contracts completed after 12/31/23.
	this Exhibit Application/Contract and signing below, we agree and consent to receive all fax and/or e-mains and advertisements sent by or on behalf of Event Management, Event Contractors and Service Providers
Signature:	
Date:	