

PICA
2017 ABM & CONFERENCE
NOVEMBER 3 & 4
Thousand Oaks, California

APPLICATION & EXHIBIT SPACE CONTRACT

Professional Investigators of California
P.O. Box 568, Verdugo City, CA 91046
Telephone/Fax: (800) 765-7422 - www.picaNow.com

Exhibit space rental fees may not be tax deductible as a charitable contribution.

EXHIBIT SPACE RENTAL FEE: The fee for one exhibit space: **\$300 - includes 8 foot skirted table, all meals, electrical hook-up, and wireless internet for one vendor. \$120 fee will be charged for each additional vendor in the booth to cover the cost of meals.**

PAYMENT TERMS: Payment in full must be received **no later than October 23, 2017. Charge or check payable to PICA and mailed with copy of this agreement and information form.**

STATEMENT OF THE NATURE OF THE EXHIBITOR'S BUSINESS AND TYPE OF PRODUCT TO BE DISPLAYED: This item must be completed and the exhibit will be limited to the display described below. Any changes in the exhibit are subject to written approval of **PICA**. Please note that the use of exhibit space is subject to restrictions as described.

EXHIBITOR:

Company/Organization/Individual Name: _____

Street Address: _____

City: _____ State: _____ Zip : _____ Telephone: _____

Type of Business: _____

Products to be Displayed: _____

The individual signing this contract represents and warrants that he has been duly authorized to execute this binding contract on behalf of the named Exhibitor.

Signed: _____ Date: _____

Name (Please Print): _____ Title: _____

INSTALLATION AND REMOVAL TIME: Exhibitors may begin set-up **November 3, 2017 at 6:00 a.m. must be complete by 8:00 a.m.**

Dismantling on **November 4, 2016** may not begin until **5:30 p.m. and must be completed by 7:00 p.m. Help will be provided if necessary.**

CANCELLATION: (a) Cancellations will be accepted in writing up to **October 23, 2017** and exhibitor shall pay a cancellation fee equal to one-half exhibit space rental fee. After October 31, 2013, cancellation notices are not entitled to a refund. (b) If the Exhibitor does not make full payment when due under the terms of this contract, PICA may terminate this contract and the Exhibitor shall be responsible for payment to PICA all amounts which would have been due PICA, under the terms of subparagraph (a) above, if the Exhibitor had cancelled this contract as of the date of such default.

LIABILITY: Neither **PICA**, its officers, members, their agents or representatives will be responsible for any injury, loss, or damage that may occur to the Exhibitor or the Exhibitor's employees or property from any cause whatsoever. Under no circumstances will **PICA** be liable for lost profits or other incidental or consequential damages. **PICA**, its officers, members, their agents or representatives shall not be liable for failure to perform the obligations under this contract as a result of strikes, riots, acts of war, acts of God, or any other cause beyond its control. Anyone visiting, the Exhibitor's exhibit(s) is deemed to be the invitee, guest or licensee of the Exhibitor, and not of **PICA**, their agents or representatives. **PICA** shall not be liable for any injury to the property of the Exhibitor or to invitees, licensees, or guests of the Exhibitor. Exhibitor agrees to abide by existing agreements and regulations covering the use of services or labor in the Exhibition facility. The Exhibitor assumes full responsibility and liability for the acts or omissions of its agents, employees, or independent contractors, whether acting within or without the scope of their authority and agrees to save harmless, **PICA**, its officers, members, their agents or representatives and the facility from responsibility or liability resulting directly or indirectly from such acts, or omissions. There is no other agreement or warranty between the Exhibitor and **PICA**, their agents or representatives except as set forth in this document. The rights of **PICA**, their agents or representatives shall not be deemed waived except as specifically stated in writing and signed by an authorized officer of their organization.

SECURITY AND INSURANCE: **PICA** will NOT supply guard service during the hours the exhibit area is closed. The Exhibitor is solely and fully responsible for its own exhibit materials and should insure its exhibit against loss or damage from any cause whatsoever. All property of an exhibitor is understood to remain in its care, custody and control in transit to or from or within the confines of the Exhibit Hall. Exhibitor agrees to waive its right of subrogation against **PICA** and the officers, members, their agents or representatives.

CARE OF BUILDING AND EQUIPMENT: Exhibitors, their agents, employees or independent contractors must not injure or deface the walls or floors of the building, the exhibit spaces, or the equipment of the exhibit spaces. When such damage appears, the Exhibitor is liable to the owner of the property so damaged. All materials used in decoration must be flameproof. Electric wiring must conform with the National Electric Code safety rules and all other applicable rules, regulations, fire laws, electrical codes and other laws of the city of Thousand Oaks, California, which affect the installation, conduct and disassembly of the exhibit. Combustible materials or explosives are not permitted in the Exhibit Hall. The Exhibitor shall also comply with all reasonable requests of officials of the facility with respect to the installation, conduct and disassembly of its exhibit.

METHOD OF PAYMENT: *(Checks made payable to PICA)*

\$300.00 (Includes one 8 foot skirted table and all meals and snacks for one vendor)

Total Amount Enclosed: _____

\$120.00 x _____ = _____ (For each additional vendor meals and snacks)

Charge Check #: _____

Credit Card # _____

M/C VISA Exp. Date: _____

Signature and billing address above apply to this credit card

CSC #

INFORMATION FORM

PLEASE COMPLETE THE FOLLOWING INFORMATION AND RETURN WITH VENDOR CONTRACT

Exhibiting Company: _____

Street Address: _____

City: _____ State _____ Website: _____

Phone: _____ Fax: _____ Cellular: _____

Contact Name: _____ E-mail: _____

Names of Vendors attending conference: (Please print clearly for nametag identification)

1. _____ Cell phone # _____

2. _____ Cell phone # _____

3. _____ Cell phone # _____

Yes, you have permission to use my company logo on all PICA Conference promotional material.

Yes, you have permission to reprint information and photos from my company website or brochure.

PRINT NAME: _____ DATE: _____

Company Representative

SIGNATURE: _____ TITLE: _____

Special Assistance Needed: _____

Special Dietary Needs: _____

COMMENTS:

PLEASE MAIL or FAX THIS FORM, VENDOR CONTRACT AND PAYMENT TO: FAX: 800-765-7422

PICA

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Verdugo City, CA 91046

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