



# ATCA GLOBAL CONFERENCE & EXPO ONLINE EXHIBITOR CONTRACT

Type in the requested information to complete this Exhibitor Contract.

Fields marked with an \* are required information

## COMPANY INFORMATION

**ⓘ The person listed here will be considered the Main Point of Contact (POC) and will receive the confirmation email that this Exhibitor Contract has been received and will also receive the Exhibitor Zone login credentials. The Main POC will be responsible for sharing the login credentials with Exhibit Staff/individuals that require access to their Exhibitor Zone Profile.**

Prefix: \*

Main Point of Contact First Name: \*

Main Point of Contact Last Name: \*

Company Name :\* **ⓘ Company Name that will appear on the Conference website and in ALL marketing material.**

Header on Booth: \***ⓘ Company Name that Shepard will print on your Identification Booth Header.**

Job Title :

Address 1: \*

Address 2 :

Address 3 :

City: \*

County/State: \*

Country: \*

United States ▼

Postal Code: \*

Telephone: \*

+ Country code

- Area code

- Telephone No

Extension:

Fax:

+ Country code

- Area code

- Fax no

Mobile:

+ Country code

- Mobile no

Email: \*

Website :

http://

**MARKETING CONTACT**

**ⓘ The contact information listed here will be displayed in the Conference Guide. If no contact information is typed in, the Main Point of Contact's information will be displayed.**

Same As Main Contact

Marketing Point of Contact Name : \*

Marketing Point of Email : \*

Telephone : \*

Address 1 : \*

Address 2 :

Address 3 :

City : \*

County/State : \*

Country :

Postal Code : \*

**BILLING CONTACT & ADDRESS FOR INVOICE**

**ⓈFor contracting purposes, the Main Point of Contact listed shall be liable for all charges. If the Billing Address needs to be changed, please send in a written request to [sandra.strickland@atca.org](mailto:sandra.strickland@atca.org) (mailto:sandra.strickland@atca.org) AND [ashley.haskins@atca.org](mailto:ashley.haskins@atca.org) (mailto:ashley.haskins@atca.org)**

Same As Main Point of Contact

Billing Company Name: \*

Billing Point of Contact Name: \*

Billing Point of Email: (For Invoice)\*

Telephone: \*

Address 1: \*

Address 2 :

Address 3 :

City: \*

County/State: \*

Country: \*

Postal Code: \*

**ADDITIONAL POINT OF CONTACT #1**

Additional Point of Contact #1 Name: \*

Additional Point of Contact #1 Email: \*

Telephone: \*

Address 1 :

Address 2 :

Address 3 :

City:

County/State:

Country:

Postal Code:

**ADDITIONAL POINT OF CONTACT #2**

Additional Point of Contact #2 Contact Name: \*

Additional Point of Contact #2 Email: \*

Telephone: \*

Address 1 :

Address 2 :

Address 3 :

City:

County/State:

Country:

Postal Code:

**BOOTH INFORMATION**

Booth Number(1<sup>st</sup> Choice): \*

Booth Number(2<sup>nd</sup> Choice):

Booth Number(3<sup>rd</sup> Choice):

Length :

Width :

Booth Area :

No Of Corner(s): \*

Are you an ATCA Corporate Member ?:

Select your Company:

Select ▼

Booth Fee (\$): **(Member - \$48sq. ft./Non-Member - \$60sq. ft)**

Hall:

Convention Center Hall A

COMPLIMENTARY Attendee Badges(s) :

Exhibit Staff Badges :

0

Date: **2022-07-20**

**COMPETITOR/ASSOCIATE PROXIMITY**

List Any Exhibitor you wish to be near (Associates) :

List Any Exhibitor you DO NOT wish to be near (Competitors)

**SPACE ASSIGNMENT PRIORITY**

**Rank (1-4) Beginning with most important criteria for space assignment :**

Floor Location :

- ▼

Competitor Proximity :

Associate Proximity :

Corner Space :

**IMPORTANT NOTE:** This Exhibitor Contract places the Exhibitor in the booth assignment process. Based on the information provided in this Exhibitor Contract, ATCA will place the Exhibitor's booth in the hall using the placement priorities outlined in the **Booth Allocation Process section of the Exhibitor Prospectus until MAY 31, 2022. Booth assignments for all Exhibitor Contracts submitted AFTER MAY 31, 2022, will be based solely on a first come, first serve basis. Payments term for Exhibitors who receive a booth assignment PRIOR TO MAY 3, 2022, is NET 30 days. If payment is not received by your due date, your Exhibitor Contract will be voided, your booth assignment will be released, and you must re-select your booth space based on booth spaces that remain. For all other Exhibitor Contracts that are submitted AFTER MAY 31, 2022, the Exhibitor has 30 days to make payment or provide payment confirmation (such as a Purchase Order, etc.). If payment or payment confirmation is not received within 30 days of the booth placement confirmation, this Exhibitor Contract will expire, and any future booth placement will occur on a first come first served basis. Upon receipt of booth assignment confirmation, Exhibitor has 30 days to make payment or provide payment confirmation (such as a Purchase Order, etc.). If payment or payment confirmation is not received within 30 days of the booth placement confirmation, this Exhibitor Contract will expire, and any future booth placement will occur on a first come first served basis.**

**PAYMENT INFORMATION**

Check  Purchase Order  WIRE  CREDITCARD  Please Invoice

**Purchase Order \*\*\*If paying by Purchase Order, please email your PO to [sandra.strickland@atca.org](mailto:sandra.strickland@atca.org). (mailto:sandra.strickland@atca.org)\*\*\***

**Wire \*\*\*If paying by Wire, please email [ashley.haskins@atca.org](mailto:ashley.haskins@atca.org) (mailto:ashley.haskins@atca.org) for wire instructions.\***

**CANCELLATION POLICY:**

**Booth cancellations or reductions made in writing and received by ATCA NLT by July 29, 2022, will be refunded, less a 15% administrative fee. No refunds or cancellations after July 29, 2022.**

**PRODUCT CATEGORIES \* (A MAXIMUM of 5 can be selected)**

AAM/UAM Advanced Air Mobility/Urban Drones - Unmanned Aircraft Air Mobility  Systems (UAS)  Other



<input type="checkbox"/> Aeronautical Information Systems (AIS)	<input type="checkbox"/> Drones - Unmanned Traffic Management (UTM)	<input type="checkbox"/> Precision Landing Systems
<input type="checkbox"/> AI/AR (Artificial Intelligence/Augmented Reality)	<input type="checkbox"/> Environmental Controls	<input type="checkbox"/> Radar
<input type="checkbox"/> Airfield Operations	<input type="checkbox"/> Flight Data Processing Systems	<input type="checkbox"/> Radios
<input type="checkbox"/> ATC Towers/Mobile Control Towers	<input type="checkbox"/> Ground - Based Navigational Aids	<input type="checkbox"/> Radomes
<input type="checkbox"/> Aviation and STEM Education/Courses/Degrees	<input type="checkbox"/> Ground - Ground ATC Data Networks	<input type="checkbox"/> Remote Maintenance Monitoring
<input type="checkbox"/> Avionics	<input type="checkbox"/> Ground Handling	<input type="checkbox"/> Safety Systems/Risk Assessment
<input type="checkbox"/> Commercial Space	<input type="checkbox"/> Headsets	<input type="checkbox"/> Satellite Navigation Networks
<input type="checkbox"/> Communications - Data-Link	<input type="checkbox"/> Human Factors	<input type="checkbox"/> Sensor Technology
<input type="checkbox"/> Communications - Voice	<input type="checkbox"/> iCloud Solutions	<input type="checkbox"/> Software
<input type="checkbox"/> Communications Control/Voice Switching	<input type="checkbox"/> Industry Professional or Trade Association	<input type="checkbox"/> Surveillance Systems
<input type="checkbox"/> Consoles	<input type="checkbox"/> Integrated Telephone Systems/Services	<input type="checkbox"/> Trade Centers/Skill Certifications
<input type="checkbox"/> Consulting	<input type="checkbox"/> Lighting (Runway/Taxiway)	<input type="checkbox"/> Trade Publications
<input type="checkbox"/> Cyber Security	<input type="checkbox"/> Meteorological Equipment	<input type="checkbox"/> Training Equipment (including Simulators)
<input type="checkbox"/> Displays	<input type="checkbox"/> Modular Systems Furniture	

**ORGANIZATION TYPE \***

<input type="checkbox"/> Small/Disadvantaged	<input type="checkbox"/> Non-Profit
<input type="checkbox"/> Woman Owned	<input type="checkbox"/> ANSP
<input type="checkbox"/> Association	<input type="checkbox"/> Other

**SUBMITTED BY**

Name: \*

Job/Title: \*

Email: \*

Signature: \*

enter signature

Date: **2022-07-20**

Agree with the Terms and Conditions

Enter below text:



Submit

Print Current Page