SIGNAGE OPPORTUNITIES - 2021 NATIONAL MEDICARE SUPPLEMENT SUMMIT

September 8-10, 2021 Schaumburg (Chicago) IL

We are pleased to offer the following opportunities for additional signage at the 2021 Summit. EXCLUSIVELY AVAILABLE to Conference Sponsors. Everything is FIRST COME!

Questions: Call Jesse Slome, AAMSI, 818-597-3205

To Order Signage: SUBMIT THE ATTACHED RESERVATION FORMS to SourceOne (Pages 3 & 4)

Payment form MUST BE PROVIDED to secure your order. Artwork due August 18, 2021. See payment form for cancellation charges.

CLASSROOM DOOR SIGNS - outside doorways to the largest session room + meal room. Schaumburg East and Schaumburg West. Up Wednesday (Agent Free Day), Thursday & Friday (thru Noon)

Total Number Available: Four (4) Size: 3 feet wide x 7 feet tall.

Offered first to **DIAMOND** SPONSORS. Limit: 1-per sponsor. If all 4 Classroom Door Signs are NOT reserved by June 1, we will make them available to Platinum level sponsors.

Cost-per Classroom Door Sign: \$950 Each

HALLWAY METER BOARDS - displayed along the hallway leading

from the Renaissance Hotel to the session rooms and toward the exhibit hall. Up Wednesday (Agent Free Day), Thursday & IF possible Friday (thru Noon)

Number Available: 27 Size: 3-feet wide x 7-feet tall (36" x 84") Printed both sides, includes hoofer feet.

Maximum of 3 boards per-sponsor

Cost-per Hallway Meter Board display: \$750 Each

FLOOR DECALS - applied to the carpet along the hallway leading from the Renaissance Hotel to the session rooms and toward the exhibit hall. Up Wednesday (Agent Free Day), Thursday

Number Available: 36 Size: 3-feet long x 2-feet wide less the arrow area.

Maximum of 3 floor signs per-sponsor

Cost-per Floor Decal: \$125 each floor decal

STAIRCASE LOGOS - applied to the main staircase leading up to break out rooms from the Renaissance Hotel. Up Wednesday (Agent Free Day), Thursday & Friday (thru Noon)

Total Number Available: 6 Size: 3 steps on one side (about 30" x 30")

Cost-per Staircase Logo: \$950 a 3-step section (example shown above) or \$5,500 for whole staircase











The 2021 Medicare Supplement Industry Summit September 8-10, 2021 Renaissance Hotel & Convention Center, Schaumburg, IL

EVENT SIGNAGE COMMITMENT FORM

Return this form + the payment form to: Cara Pajian <u>Email</u>: Cara@SourceOneEvents.com <u>Fax</u>: 708-344-3050

Date:		
We request and agree to pay for the	e following	:
Number of Classroom Door Signs:		Limit 1 per DIAMOND Sponsor @ \$950-each
Number of Hallway Meter Boards:		Limit 3 per-Sponsor @ \$750-each
Number of Floor Decals:		Limit 3 per-Sponsor @ \$125-each
Number of Staircase Logos:		@ \$950-per-3-step section

NOTE: Placement will be random with signs interspersed. Pricing reflects all production, placement and removal costs. Artwork is the responsibility of the sponsor. Payment will be processed once approved by the Association. Artwork MUST BE PROVIDED by August 18, 2021 or your order will be cancelled. A refund less an administrative charge of between 50 and 100% will be applied.

CONTACT INFORMATION

Company Name ______ Contact Name ______ Phone ______ E-mail Address

Artwork is due to SourceOne by August 18, 2021.

Charge Authorization



Show Name	Booth Number	Date
The 2021 Medicare Supplement Industry Summit		

Charge Authorization - Payment Policy

Payment for Services - SourceOne requires full payment prior to the time services are ordered. SourceOne requires a credit card authorization with order.

Method of Payment Onsite – SourceOne Events, Inc. accepts MasterCard, VISA, Discover, American Express and cash. We do not accept purchase orders as forms of payments. All payments are to be made in U.S. funds drawn on a U.S. Bank.

Third Party Billing – SourceOne requires that the exhibiting firm is responsible for all charges incurred on its behalf. If third party does not pay for services SourceOne reserves the right to collect full payment from exhibitor.

Cancellation of Order – Orders cancelled by the Exhibitor or due to the cancellation of the event or non-participation may be subject to a cancellation fees equal to 50%-100% of the total order, based on the status of the move-in, work performed and SourceOne setup costs or expenses.

	Amount Due	\$
Method of Payment Charge my cred	lit card in the amount of	\$
MasterCard VISA Discover American Express Corporate Card Personal C	ard	
Account #:		
Exp. Date: / CVV2 number: each credit card accoun reverse italic characters number. On American E usually on the right side.	VC2 or CID) is a three or four digit value that t. On Visa and MasterCard cards, it is a three on the signature panel following the last 4 d xpress cards, it is a four digit value printed or In a card-not-present environment such as at the cardholder does in fact have the card	ee digit value printed in ligits of the account on the front of the card, the Fax or Internet, CVV2

Cardholder Payment Information

Cardholder's Name (Please Print)			Email Address (If Different Than Below)		
Cardholder's Billing Address (Please Print)	(Street)	(P.O. Box)	City	State	Zip/Postal Code
Cardholder's Phone (If Different Than Below)		Ext.:	Cardholder's Fax (If Different T	han Below)	
Authorization Signature			Authorized By – Please Print	Date	

Payment Information (If Different Than Cardholder Info)

Company Name			Email Address		Booth Number
Address	(Street)	(P.O. Box)	City	State	Zip/Postal Code
Phone		Ext.:	Fax		
Authorization Signatu	ıre		Authorized By – Please Print		Date

Please Note: By signing, I agree to all terms and conditions of the contract. I authorize services to be charged to this card for this event only.