

# Chapter Leadership Institute

July 16-17, 2021 | St. Louis, Missouri



## 2021 ALA Specialty Conferences Exhibit and Sponsorship Agreement

### SIGN UP

Please complete, sign and email to your Business Development Representative

OR

Fax to 443-281-0660

Written confirmation will follow

**Agreement:** It is understood that this application will become a binding contract upon acceptance by ALA, and incorporated into this contract are the following terms, conditions and the Rules and Regulations (found at [www.ALAbp.org](http://www.ALAbp.org)). The individual signing this agreement represents and warrants that they are authorized to execute this binding agreement on behalf of the exhibiting company, and should they be removed from their position, the contracting organization is required to fulfill the obligations under this agreement.

**Payment Policy:** Applications must be accompanied by payment in full. CONTRACTS WILL NOT BE PROCESSED WITHOUT PROPER PAYMENT. No exceptions will be made.

**Acceptance:** ALA reserves the right to exercise its sole discretion in acceptance or refusal of applications. If an applicant is not accepted by ALA, all money paid will be returned to the applicant.

**Space Assignments:** Priority for space assignments is based on date of received agreement (see Rules and Regulations [www.ALAbp.org](http://www.ALAbp.org)).

**Cancellations:** By signing this agreement, the exhibiting company and individuals representing exhibiting company understand that this agreement and all its terms, conditions, and rules are non-cancelable. Exhibiting company is responsible for payment of the total amount due to ALA as represented in this agreement, regardless of exhibitor attendance or lack of attendance at the events represented in this agreement. All terms, conditions, and Rules and Regulations (found at [www.ALAbp.org](http://www.ALAbp.org)).



Gold Sponsor

\$7,500



Silver Sponsor

\$3,500



Bronze Sponsor

\$1,900

### Contact Information

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Web Address: \_\_\_\_\_

Primary Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### Billing Information

**Invoice my company at the provided address.** I understand that payment is due upon receipt of invoice. Make checks payable to the Association of Legal Administrators, Attn: Account receivables-ALA, P.O. Box 95583, Chicago, IL, 60694-5583, for U.S. Dollars only.

**Send invoice to alternate address.**

Billing Address if different then above: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Signature (X)** \_\_\_\_\_

Date: \_\_\_\_\_ Print Name \_\_\_\_\_ Title: \_\_\_\_\_

[ALAbp.org](http://ALAbp.org)



667-206-4266