

PT 2012.

June 6-9, 2012 Tampa, FL.
Annual Conference and Exposition of the
American Physical Therapy Association
connect.

Exhibitor Application/Contract

Exposition dates: June 7-9, 2011 | Tampa Convention Center, Tampa, Florida

Send your application in prior to the early-bird deadline
(March 21, 2012) for priority placement!

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PT 2012 June 6-9, 2012 Tampa, Florida



PLEASE PRINT OR TYPE INFORMATION.

COMPANY NAME _____ CONTACT PHONE _____
CONTACT PERSON _____ TITLE _____
E-MAIL _____ WEB _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
SIGNATURE _____ DATE _____

By signing this application, you are stating that your company is not a physician-owned practice. For clarification, see the Referral for Profit section at www.apta.org/annualconference/exhibit/. In addition, by signing this application, you are agreeing that you have read and will adhere to the Rules and Regulations that can be found at www.apta.org/annualconference/exhibit/.

Preferred location: Exhibit Hall Career Center Corner In-line Total # of booths _____

Preferred booth #: 1. _____ 2. _____ 3. _____ 4. _____

Please place us near/away from the following companies: (near / away): _____

If you have exhibited previously under another name, please provide name: _____

Please provide the name of your insurance company: _____

Applications received after March 21, 2012, will be processed on a first-come, first-served basis. For applications received before March 21, 2012, the balance is due on April 20, 2012. All information must be complete in order for application to be processed. Forms with no payment information will not be processed.

PRODUCT/SERVICE CATEGORIES (SELECT UP TO 3)

1. ___ Ambulatory aids	9. ___ Education	17. ___ Hospital	25. ___ Publishers (books)
2. ___ Assessment aids/evaluation/testing	10. ___ Electrotherapy	18. ___ Hydrotherapy	26. ___ Publishers (magazines)
3. ___ Career development/Recruiter	11. ___ Employment agency	19. ___ Insurance	27. ___ Rehabilitation facilities
4. ___ Cold therapy	12. ___ Exercise/treatment	20. ___ Lifts/transfer devices	28. ___ Therapy Services Prov
5. ___ Computer software	13. ___ Financing/leasing	21. ___ Non-Profit	29. ___ Ultrasound
6. ___ Consulting/practice mgmt	14. ___ Functional equipment/Mobility	22. ___ Orthoses	30. ___ FCE/work hardening
7. ___ Contract therapy services	15. ___ General equipment and supplies	23. ___ Pediatric aids	31. ___ Wound/skin care
8. ___ Cushions/pillows/positioning	16. ___ Heat therapy	24. ___ Prostheses	32. Other: _____

Cancellation Policy: All cancellations must be received in writing.
Non-profit/career center booths: no refunds. Please refer to the Rules and Regulations at www.apta.org/annualconference/exhibit/ for further details on our cancellation policy.

Product(s) to be displayed:	FDA	
	Exempt	Cleared
_____	_____	_____
_____	_____	_____

PAYMENT INFORMATION

50% deposit is due with application received **before March 21, 2012**. Applications received **after March 21, 2012**, require full payment (100%) with application. All information must be complete in order for application to be processed. **Forms with no payment info will not be processed.**

CHECK \$ _____ (payable to APTA)

CREDIT CARD: Visa MasterCard American Express

CARD NUMBER _____ EXPIRATION DATE _____

NAME ON CARD _____

BILLING ADDRESS _____ CITY _____ STATE _____ ZIP _____

CARDHOLDER SIGNATURE _____

AMOUNT TO BE CHARGED*\$ _____ (*Subject to change based on booth space availability and assignment)

Initials: ____ If you are paying by credit card, please initial on the line to authorize APTA to charge the balance due on your account on April 20, 2012.

Please send completed application to: Karen Kimakovich, Exhibits APTA, A. Fassano & Company, 900 Route 168, Suite A-2, Turnersville, NJ 08012. Phone: 856/232-2322 or e-mail: karen_kimakovich@AFassanoCo.com

Make checks payable to APTA and mail to: PT 2012 Exhibits, Attn: Karen Kimakovich, c/o A. Fassano & Company, 900 Route 168, Ste. A-2, Turnersville, NJ 08012