

## CAADE Conference 2018

“Excellence in Education for Addiction Professionals”

### Conference Exhibitor Agreement

Agency/Organization: \_\_\_\_\_

Main Contact Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Main Contact E-Mail: \_\_\_\_\_

#### Exhibitor Registration Type:

- Exhibit Table + 1 Conference Registration: \$500
- Exhibit Table + 2 Conference Registrations: \$750
- Take One Table: \$100

#### Payment Type:

- Check (Payable to CAADE)  PayPal
- Credit Card
  - Visa  MasterCard  Discover

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ Security Code: \_\_\_\_\_  
MM YY

Name On Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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

Amount: \$ \_\_\_\_\_ Phone: \_\_\_\_\_

**CANCELLATION/REFUND POLICY:** *If you are unable to attend the conference or have a substitution, please send a written cancellation/substitution notice to [conference@caade.org](mailto:conference@caade.org) no later than April 1, 2018*

I authorize CAADE to bill the credit card identified above for the amount indicated. I also understand and agree to the terms outlined for the Exhibitor Registration option chosen by the sponsoring agency listed above and CAADE's cancellation/refund policy.

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

California Association for Alcohol/Drug Educators & NAADAC

Proudly Present:

**CAADE Conference 2018**

*“Excellence in Education for Addiction Professionals”*

**Exhibitor Attendee Information:**

1) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_

Vegetarian Meals:  No  Yes

2) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_

Vegetarian Meals:  No  Yes

\*Any additional staff will be added at the Early Bird conference rate of \$275 before March 20, 2018 or the full rate of \$325 thereafter.

All exhibitor agreements must be received with full payment of fees by Thursday, April 12, 2018 in order to be included in conference literature and signage.

**\*Please Note\***

Exhibitor Registration does not include hotel accommodations.

To reserve a room at the Sheraton Gateway LAX go to:

**[www.starwoodmeeting.com/Book/CAADE](http://www.starwoodmeeting.com/Book/CAADE) or call **800-325-3535****

**and ask for the *CAADE 2018 Annual Conference rate at the Sheraton Gateway LAX.***

Application and payment may be sent to:

CAADE

5230 Clark Ave., #3

707 Lakewood, CA 90712 [conference@caade.org](mailto:conference@caade.org)

Email: [conference@caade.org](mailto:conference@caade.org) Fax: (562) 275-3494