



# 2023 Exhibition Registration Form

Please complete items 1-8 and return this contract with payment to:  
 Society for In Vitro Biology, C/O New Beginnings Management  
 120 Shallotte Crossing Parkway, #5, Suite 343 \* Shallotte, NC 28470  
 Phone (910) 755-5431 \* Fax: (910) 755-5432  
 Email: marietta@newbeginningsmanagement.com

This contract reserves exhibit space at the 2023 In Vitro Biology in Norfolk, Virginia held from June 10-14, 2023. Confirmation of receipt will be sent to us. It is understood that as an exhibitor, we are required to abide by the rules set by the meeting and all conditions set by the venue (*see hotel requirements on page 2*). If any of our plans change, we may cancel this contract no later than 4 months prior to the start of the meeting and receive a full refund less a \$50 administrative fee; later cancellation funds will be subject to a 75% cancellation charge of the total cost.

**1. Company information:** (*this information will be included in the program booklet given to attendees*)

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**2. To complement your display, the SIVB offers a 25-word description in the Program Booklet (please type/print your description)**

**3. We will exhibit the following products/ services (please use generic terms)** \_\_\_\_\_

**4. Exhibitors from whom you desire separation:** \_\_\_\_\_

**5. Exhibition Space:** Number of Floor Displays: \_\_\_\_\_ or Number of Tabletop displays: \_\_\_\_\_

**6. Items being purchased:**

Tabletop Deposit (\$850 per tabletop):	\$850	X _____	_____
Floor Display Deposit (\$1,050 per floor display):	\$1,050	X _____	_____
Refreshment Break donation	\$60	X 1	\$60.00
Registration Bag Insert	\$350	X _____	_____
Pre-registration list / Post-registration list	\$250 /\$300	X _____	_____
Event Website/Mobile Advertising ( <i>See website for prices</i> )	_____	X _____	_____
Other: _____	\$ _____	X _____	_____
			<b>Total Due</b> _____

**7. Company Contact** (*all correspondence will go to this person*):

Name (required): \_\_\_\_\_

Email (required): \_\_\_\_\_ Phone: \_\_\_\_\_

**8. ENCLOSED: Method of Payment:**

- Check payable to 2023 In Vitro Biology Meeting is enclosed. (*if not USA bank, add bank clearance fee of \$10 Canada; \$25 all others*)
- Credit Card  Full amount to be billed to credit card  Deposit to be billed to my credit card \$ \_\_\_\_\_ (*Balance due April 8, 2023*)

**Card Type:**  Visa  MasterCard  Discover  American Express **Expiration date.** \_\_\_\_/\_\_\_\_ **CSV** \_\_\_\_\_

**Card #** \_\_\_\_\_ **Name on Card** \_\_\_\_\_

**Billing Address for Credit Card**

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

**9. Exhibit Guidelines:** By signing this form to exhibit at the 2023 In Vitro Biology Meeting, you are agreeing to the rules and guidelines of the 2023 SIVB Exhibition at the Hilton Norfolk The Main (*please see page 2*).

**Reviewed and accepted by** (*please print*): \_\_\_\_\_ Date \_\_\_\_\_

**Signature** \_\_\_\_\_

## 2023 Exhibition Guidelines

The Hilton Norfolk The Main will be the site of the 2023 In Vitro Biology Meeting (Hotel). Guests booking their hotel as part of the SIVB room block receive complimentary wi-fi internet.

By returning of this agreement, you (the Exhibitor) hereby assumes entire responsibility and hereby agrees to protect, defend, indemnify and save Hotel, its owners, its operator, and each of their respective parents, subsidiaries, affiliates, employees, officers, directors, and agents and Society for In Vitro Biology and its owners, its operator, and each of their respective parents, subsidiaries, affiliates, employees, officers, directors, and agents harmless against all claims, losses or damages to persons or property, governmental charges or fines and attorney's fees arising out of or caused by its installation, removal, maintenance, occupancy or use of the exhibition premises or a part thereof, excluding any such liability caused by the sole gross negligence of Hotel and its employees and agents.

The Exhibitor shall obtain and keep in force during the term of the installation and use of the exhibit premises, policies of Comprehensive General Liability Insurance and Contractual Liability Insurance, insuring and specifically referring to the Contractual liability set forth in this agreement, in an amount not less than \$2,000,000 Combined Single Limit for personal injury and property damage.

Hotel, its owners, and its operator shall be included in such policies as additional named insureds. In addition, the exhibitor acknowledges that neither Hotel, its owners, nor its operator maintain insurance covering exhibitor's property and that it is the sole responsibility of the exhibitor to obtain business interruption and property damage insurance insuring any losses."

### For Additional Information

Please visit our website at <https://sivb.org/meetings/exhibit-information-2023.html> and look for the "Forms & Info" section of the page for more information regarding shipping, ordering electricity and Internet, and other exhibition services, for the meeting.