

COMPANY NAME

For Office Use Only 2015

GREAT

The undersigned on behalf of the company above (hereinafter called "Exhibitor") hereby applies for the following exhibit space in the "World of Private Label USA" Pavilion of the PLMA Private Label Trade Show to be held at the Donald E. Stephens Convention Center, Rosemont, Illinois, 15-17 November 2015. The undersigned has read and agrees to be bound by the Terms and Conditions of the Trade Show and gives permission to PLMA to communicate information regarding this event and future programs and events by mail, telephone, fax, e-mail or other electronic communication services and networks.

COMPANY INFORMATION

Address Postal Code City Country Exhibitor Contact Job Title Telephone Fax E-Mail Website

"World of Private Label USA"

Pavilion Rate

 1 Unit @ US\$4,500 2 Units @ US\$7,300

(Each exhibit unit includes laminated separation walls, 3 shelves, display counter, round conference table with 3 chairs, carpet, waste basket and fascia)

SPECIFIC PRODUCTS TO BE EXHIBITED

Please describe all products to be exhibited:

COMPANY LISTING

Please complete listing as you wish it to appear in Trade Show catalogue if different from company information above.

Company Name Address Postal Code City Country Telephone Fax E-Mail Website

Product Information: If this is the same as "Specific Products to be Exhibited" above, check here and proceed to the next section. If not, please describe products as they should appear in the catalogue, online directories and other publications.

PLMA reserves the right to edit listings to fit available space, format and style. Brand names or promotional copy are not acceptable in product listings.

Application to Exhibit

PRODUCT CODES

Complete the enclosed Product Codes form, select the categories that best describe the products to be exhibited and return to PLMA with this application.

PAYMENT INSTRUCTIONS

Complete payment information below. Payment in full must accompany application. Make transfer payable to Private Label Manufacturers Association. Please make sure that your bank includes your company name on the transfer to ensure credit for your payment. Bank details are: JPMorgan Chase Bank, N.A., 633 Third Avenue, New York, NY 10017. ABA# 021000021, Account #000716503238501, SWIFT Code: CHASUS33.

		Amount
A. Enter Rate for Exhibit Space from previous page.		\$ <input type="text"/>
B. Enter dues surcharge based on calculation below to make dues payment equivalent to PLMA members located in the United States.		
Private Label Sales in U.S.		
Less than US \$3 million	No Surcharge	\$ <input type="text"/>
Between US \$3 million-US \$10 million	Add US \$ 750	\$ <input type="text"/>
Between US \$10 million-US \$20 million	Add US \$1,500	\$ <input type="text"/>
Between US \$20 million-US \$40 million	Add US \$2,250	\$ <input type="text"/>
More than US \$40 million	Add US \$3,000	\$ <input type="text"/>
TOTAL		\$ <input type="text"/>

AUTHORIZATION

Name: Job Title:

Signature: Please Print - Signature Required Date:

Retain a copy of this Application and Trade Show Terms and Conditions for your records.

- ✓ Please sign and return to:
 Private Label Manufacturers Association
 630 Third Avenue, New York, NY 10017
 Phone: (212) 972-3131 Fax: (212) 983-1382

<i>(For Office Use Only)</i>	
Accepted by _____	Date _____
Paid _____	Dues _____
<input type="checkbox"/> Active	<input type="checkbox"/> Associate
<input type="checkbox"/> Other _____	
<input type="checkbox"/> Surcharge Paid _____	
<input type="checkbox"/> User ID# _____	