# EXHIBIT SPACE CONTRACT 2022

**Tennessee Public Health Association**  
P. O. Box 301  
Hendersonville, TN 37077

**EXHIBIT SPACE**

<table>
<thead>
<tr>
<th>A. $ 500 per space for commercial companies</th>
<th>B. $ 300 per space for non-commercial agencies</th>
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For conference sponsorship/agency membership options that include exhibit space, go to [https://www.tnpublichealth.org/sponsorship-levels](https://www.tnpublichealth.org/sponsorship-levels)

Number of exhibit spaces needed ________  
Total Cost of Exhibit Space: $ ____________

**GENERAL INFORMATION**

1. Standard space includes: One 6-foot table with linen and chair(s) (Size of exhibit must be contained within this space; additional space may be purchased.)

2. Do you need an electrical outlet? Yes ______ No _______ (Please check one)

Name and address of representative(s) who will operate exhibit: *(PLEASE PRINT)*

Name: * _______________________________________
Address: ______________________________________

**Additional persons who need name tags:**

2. ____________________________________________
3. ____________________________________________
4. ____________________________________________

Phone: ______________________ Fax: ____________________
E-mail: ____________________________________________

*(Information including Welcome Letter and details like set-up time, shipping, hotel, etc. will be sent to this individual.)*

**SPECIAL EVENTS**

_____ We would like to make a contribution to help sponsor a portion of the TPHA Program....... $ ____________

_____ We would like to make a contribution to help sponsor a social event.................................. $ ______________

**COMPANY CONTACT INFORMATION**

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<tr>
<th>Company Name</th>
<th>Company Official</th>
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<tr>
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<tr>
<th>City/State/Zip</th>
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Date: _______________  
Authorized Person Email address________________________________________

Check: Enclosed _______ or Sending under separate cover ___________ *(Please check one)*

Make check payable to Tennessee Public Health Association and mail to P.O. Box 301, Hendersonville, TN 37077  
*(Full refund if cancellation received 30 days prior to annual meeting; one-half refund if received 2 weeks prior to annual meeting.)*