



56th Annual
Drosophila Research Conference
March 4-8, 2015, Chicago, IL

Promotional Give-Away Application

Deadline for Receipt of Form: February 3, 2015

Company Name: _____ Exhibit Booth #: _____

Contact/Company Representative: _____

Telephone: _____ Fax: _____ E-mail: _____

Give-Away Description: _____

Exhibitors will be permitted to distribute appropriate promotional material and approved related items from the booth only. In keeping with the educational purpose of the exhibit program, all such give-aways, with the exception of literature, must have prior approval of Exhibit Management.

If your company is planning to distribute anything other than literature from the exhibit booth, please complete and return this form along with a sample or mock-up of the give-away by February 3, 2015, to GSA Exhibit Management at the address below. [NOTE: If no sample or mock-up of the give-away item is available for submission with this application, company must enclose a detailed description of the item.]

By completing and signing this application, it is confirmed that an authorized company representative has read and understands the following rules for give-aways at the 56th Annual Drosophila Research Conference. Exhibitors will be permitted to distribute appropriate promotional material and approved related items from the exhibit booth only. In keeping with the educational purpose of the exhibit program, all such material must conform to acceptable, professional standards. Approval is at the sole discretion of GSA Exhibit Management. Further, no give-away materials will be approved in conjunction with any lotteries, raffles, contests or games of chance (lotteries, raffles, and games of chance are not permitted under the General Conduct of Exhibits which is part of the Exhibitor Space License Agreement). Any significant food (anything more than candy or mints) or beverage at the booth must be approved in writing by the hotel. This includes all alcoholic beverages. Please contact GSA Exhibit Management if you would like to make available ANY food or beverage.

AUTHORIZED COMPANY REPRESENTATIVE

GSA EXHIBIT MANAGEMENT APPROVAL

By _____

By _____

Title _____

Title _____

Date _____

Date _____

Please fax this form for receipt by February 3, 2015 to: Suzy Brown, 301/634-7079.

Questions? Please contact Suzy Brown at sbrown@genetics-gsa.org