

ASSOCIATION OF INDEPENDENT CONSUMER CREDIT COUNSELING AGENCIES

Exhibitor Information

15th Annual Conference – July 16-18, 2008

J.W. Marriott

1331 Pennsylvania Avenue

Washington, D.C. 20004

For reservations, call 202-393-2000 and ask for the "AICCCA Block of Rooms"
Reduced room rate of \$269 single/double available until June 25, 2008 or the AICCCA block fills up,
whichever comes first



**In order to print the materials and signage and arrange space,
The Exhibitor Deadline to Register OR Cancel: June 25, 2008**

EXHIBITORS WILL BE IN THE SAME ROOM AS THE SESSIONS

Salons D and E

Tuesday, July 15, 2008

4:00 p.m.-11:00 p.m.

Exhibitor Setup

Wednesday, July 16, 2008

6:00 a.m.-9:30 a.m.; 6:30 p.m.-9:00 p.m.

Exhibitor Setup

10:00 a.m.-12:00 p.m.

**Certified Counselor Exam administered by Center
for Financial Certifications**

1:00 p.m.-4:00 p.m.

**Members' Only Meeting (vendors not allowed in
room at this time)**

5:00 p.m.- 7:00 p.m

**Welcoming Reception
(complimentary, vendors welcome)**

Thursday, July 17, 2008

7:30 a.m.-5:00 p.m.

Registration/Sessions

12:00-1:00 p.m.

**Luncheon: (one person per vendor complimentary,
additional people \$65 each)**

4:30-9:30 p.m.

**National Spy Museum Tour followed by Reception
& Dinner (one person per vendor complimentary,
additional people \$100 each)**

Friday, July 18, 2008

8:30-9:30 a.m.

**Exhibitor Forum-Each exhibitor will have 5 minutes
to give out prizes/awards and talk about your
product/services. No powerpoint will be available.
Attendees must be present to win any prizes!**

9:30 a.m.-12:30 p.m.

Creditor Breakout Sessions (no break)

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EXHIBITOR APPLICATION FORM

Producers of publications, software and other products directly related to the practice of consumer credit counseling are eligible to apply for permission to exhibit such products at the 2008 AICCCA Annual Conference to be held at the J.W. Marriott Hotel.

The AICCCA maintains the right to affiliate itself only with companies who represent the highest level of professionalism and service to its members. Because of the implied endorsement of any vendor or donor relationship, the AICCCA reserves the right to decline participation with any company the relevance of which is not apparent to its members or the quality of which is subject to question.

Location: Salon D

- **ELECTRICAL & PHONE:** For telephone hookup and other equipment arrangements contact Tara Eastlee at the hotel directly on 202-626-6919. AICCCA will provide a regular power source for each vendor.
- **LUNCHEON:** One EXHIBITOR designee is entitled to attend the lunch on Thursday, July 17, 2008. Additional lunches may be purchased for \$65 per person (see attached)

IMPORTANT NOTE:

- The exhibitor room holds 20 exhibitors only. First come, first served. Must have registration and payment into headquarters to reserve space. No telephone calls to hold space.

EXHIBITOR APPLICATION

Please type:

Vendor:

Address:

City/St/Zip:

Telephone:

Facsimile:

Contact Person:

E-mail address:

Attendees Names for Name Tags:

Name & Description of Products to be Exhibited-This is the description that will be used on the website and other conference materials:

| |
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IMPORTANT

REQUIRED-PLEASE LIST DIMENSIONS OF EXHIBIT BOOTH- Exhibits May NOT Be any longer than 10 feet due to limited space. One Eight Foot Table Will Be Provided for Each Exhibitor.

The above-named Vendor hereby applies to AICCCA for permission to exhibit the above-described products at the 2008 AICCCA Mid-Winter Conference. For each exhibitor, one person shall be entitled to attend the Luncheon scheduled for Thursday, July 17, 2008. Additional luncheons and dinners may be purchased, as provided below.

_____ Exhibit space @ \$1,000 _____
(electrical, internet & other equipment needs other than 2 basic outlets,
must be arranged through the hotel)

_____ Additional Thursday Luncheon attendees @ \$65 _____

_____ Additional Spy Museum Tour/Dinner attendees @\$100 _____

EXHIBITORS – IF YOU WISH TO SPONSOR AN EVENT, PLEASE INDICATE BELOW.

The exhibitor’s name will be advertised as sponsoring the event.

Optional Sponsorship of refreshments for convention attendees:

_____ Convention break @ \$2,000 _____
_____ Continental breakfast @ \$2,500 _____

TOTAL AMOUNT DUE: \$ _____

Send completed registration form and check payable to AICCCA:

AICCCA
PMB 626, 11350 Random Hills Road
Suite 800
Fairfax, VA 22030

Tel: 703-934-6118
Fax: 703-802-0207
e-mail: assoc@aiccca.org
website: www.aiccca.org

Authorized Representative of Vendor
[signature] _____

Charge to the following account
(type or print clearly):
Card Type: (check one)
 Visa Master Card
 Discover American Express
Account # _____

Exp. Date: _____ Sec. Code: _____