

2010 LSA Annual Meeting
7-10 January 2010
Baltimore, MD

Exhibitor Representative Form

Name(s) _____

Company _____

Address _____

E-mail _____

Submitter _____

Please return by 11 December 2009 to:

David Robinson
Director of Membership and Meetings
Linguistic Society of America
1325 18th St. NW, Suite 211
Washington, DC 20036-6501
drobinson@lsadc.org
Fax (202) 835-1717

Advertising Reservation Form

LSA Policy on Exhibits, Ads, and Sales

The Linguistic Society of America reserves the right to refuse any application for exhibit space, advertising, or sales and to curtail or cancel any exhibit, advertisement, or sale. The character of the exhibits, advertisements, and sales is subject to the approval of the Executive Director or his/her designee.

2010 LSA Annual Meeting Handbook – Rates and Specifications

| | Non-Exhibitors | Exhibitors |
|-----------|----------------|------------|
| Full Page | \$600.00 | \$500.00 |
| Half Page | \$500.00 | \$400.00 |
| Cover II | \$700.00 | \$600.00 |
| Cover III | \$700.00 | \$600.00 |
| Cover IV | \$800.00 | \$700.00 |

PDF copy only

| | |
|-----------|------------------------|
| Full Page | 7" x 9" |
| Half Page | 7" x 4 ½" (horizontal) |

Please check: Non-exhibitor Exhibitor

Reserve: full page(s) in the *2010 Annual Meeting Handbook*

half page(s) in the *2010 Annual Meeting Handbook*

SOLD Cover II SOLD Cover III SOLD Cover IV

PDF will be sent to drobinson@lsadc.org by the deadline, **6 November 2009**.

Please contact me about sponsorship opportunities at the 2010 Meeting.

Name of Firm: _____

Address: _____

Telephone: _____ E-mail _____

Signature and title of contact person: _____

Please return this form with payment by **2 October 2009** to: David Robinson, Director of Membership and Meetings, Linguistic Society of America, 1325 18th St., NW, Suite 211, Washington, DC 20036-6501; fax 202-835-1717.

Payment Method:

Check enclosed Money order enclosed Visa Mastercard

Card number _____ Expiration Date _____

Signature _____

Name as it appears on the card (please print) _____

Please do not write below this line:

Amount Received \$ _____ Camera Copy Received _____

Joint Book Exhibit Reservation Form

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**Linguistic Society of America
84th Annual Meeting**

**Baltimore, MD
7-10 January 2010**

We wish to exhibit _____ titles in the LSA Joint Book Exhibit.

Payment enclosed: \$_____ (up to 3 titles (minimum order) \$200.00); up to 8 titles \$400; additional titles \$25 each)

A list of titles and prices for the Joint Book Exhibit _____ is enclosed _____ will follow. **(Please send title and price information by 2 October 2009 to ensure listing in the catalogue.)**

_____ We will offer a convention discount of _____ %. _____ We will be unable to offer a convention discount.

_____ **Please contact me about sponsorship opportunities at the Meeting.**

Orders should be sent to: _____

Name, address, signature and title of contact person:

Phone

e-mail

Note: Unless we are otherwise notified, we will sell publications displayed in the LSA Joint Book Exhibit at a discount on the last morning of the exhibit. The proceeds from the sale of these books will be donated to the Financial Assistance and Student Support Fund.

Drayage information will be provided in November. **Please do not send books to the LSA Secretariat**

Please return this form by **2 October 2009** to: David Robinson, Director of Membership and Meetings, Linguistic Society of America, 1325 18th St., NW, Suite 211, Washington, DC 20036-6501; fax 202-835-1717.

Payment Method:

Check enclosed _____ Money order enclosed _____ Visa _____ Mastercard _____

Card number _____ Expiration Date _____

Signature _____

Name as it appears on the card (please print) _____

Please do not write below this line:

Amount Received \$ _____ Date Received _____ Confirmation Sent _____

Booth Reservation Form

LSA Policy on Exhibits, Ads, and Sales

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Booth Dimensions: 8' x 10'

Booth Rental Fee: \$600 per booth (\$700 for special location request)

Exhibits Area in Key Ballroom 7/8, surrounded by LSA concurrent meetings, registration, and poster sessions. (floor plan at http://www.hilton.com/en/hotels/content/BWICCHH/media/pdf/BWICCHH_Service_floorplans_2.pdf)

We would like to reserve _____ booth(s).

Special location request (\$100 surcharge; fulfilled on a first-come first served basis):

Other location notes _____

_____ **Please contact me about sponsorship opportunities at the Annual Meeting**

Payment enclosed: _____

Name of Firm: _____

Address: _____

Telephone: _____ E-mail _____

Signature and title of contact person: _____

Note: Decorator, drayage, and hotel information will be sent in November.

Please return this form by **2 October 2009** to: David Robinson, Director of Membership and Meetings, Linguistic Society of America, 1325 18th St., NW, Suite 211, Washington, DC 20036-6501; fax 202-835-1717.

Payment Method:

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Card number _____ Expiration Date _____

Signature _____

Name as it appears on the card (please print) _____

Please do not write below this line:

Amount Received \$ _____ Date Received _____