

Exhibition Agreement

Exhibitor: National Umbrella Program

AMERICAN FILM MARKET

November 5 - 12, 2014

National Umbrella Organization: _____

This agreement is for companies to register as an Exhibitor under the umbrella office of the Organization listed above. Registration requires approval of the Organization and the AFM.

Exhibition Fee: The US\$495 Exhibition Fee is due with this agreement. There are no refunds for cancellations after Friday, July 25. The last day to register as an Exhibitor under this program is Friday, October 3.

Exhibitor Badges: The Exhibition Fee includes one (1) Exhibitor Badge. See **Badge Registration** below to submit registrant details. Additional badges are \$495 each if purchased by October 10 - \$545 thereafter. The form to purchase additional badges will be available in August.

Agreement Confirmation: A confirmation email will be sent when this *Exhibition Agreement* is received. If a confirmation is not received within 48 hours of submission please write to Exhibit@ifta-online.org

COMPANY INFORMATION

Company Name: _____

Company Name for AFM listings - leave blank if same as above: _____
only abbreviated version of the company name above - **do not** list additional companies

Main Address: _____

City, State, Postal Code, Country: _____

Main Telephone: _____ Main Fax: _____

Company Website: _____

AFM OPERATIONS CONTACT INFORMATION - Provide contact information for one (1) primary person who is organizing your company's AFM participation: online company profile, badge, screenings, etc.,

First Name: _____ Last Name: _____

Title: _____ Email: _____

Direct Telephone: _____ Mobile: _____

Provide address if different from main company address provided above.

Address: _____

City, State, Postal Code, Country: _____

BADGE REGISTRATION - Included with the Exhibition Fee is one (1) Exhibitor Photo Badge. Provide information below for badge.

This form can be submitted only once. The form to purchase additional badges will be available in August.

B A D G E	FIRST NAME: _____	LAST NAME: _____
	JOB TITLE: _____	
	EMAIL: _____	MOBILE: _____

Photo Requirements: For individuals who have not attended the AFM within 3 years or to update a photo please email the image in JPEG format, no larger than 500k to AFMExhibitorPhotos@ifta-online.org Company and individual's first and last name must be included in the file name (e.g. COMPANY_first_last.jpg). The printed photo size is 2.5cm x 3.2cm (1in x 1.25in)

PAYMENT & SIGNATURE - A US\$495 Exhibition Fee is due with this agreement. See *Exhibitor Payment Options* for details - www.AmericanFilmMarket.com/exhibitor/payment. Select payment type below and follow the instructions.

☐ **Credit Card** - submit agreement to AFMforms@ifta-online.org and a payment link will be provided.

☐ **Check** - Include a copy of check if agreement is submitted by email or fax.

☐ **Bank Wire Transfer** - Include a copy of the wire confirmation with agreement.

By signing this agreement, Company ("Exhibitor") agrees that it and its employees and other representatives will fully comply with the AFM Guidelines (posted at www.AmericanFilmMarket.com) as amended from time to time and which are incorporated by this reference, including the terms as set forth on this form and in the *Exhibition Agreement Guidelines* included with this agreement.

Print Name: _____ Title: _____

Signature: _____ Date: _____