



TNS APPLICATION FOR 2027 EXHIBITING SPACE

Exhibiting Company _____

Address _____

City, State, Zip _____

Telephone Number _____

The Primary Contact Person is the personal who should receive exhibit confirmation materials.

Primary Contact Person _____

Address _____

City, State, Zip _____

Telephone Number _____ Primary Contact Email _____

Secondary Contact Person _____

Address _____

City, State, Zip _____

Telephone Number _____ Secondary Contact Email _____

2027 ANNUAL WINTER CONFERENCE EXHIBITOR OPPORTUNITIES

☐ Standard \$5,500	☐ Bronze \$11,000 <i>Choose ONE</i> ☐ Coffee Break	☐ Silver \$13,500 <i>Choose ONE</i> ☐ Continental Breakfast ☐ Friday Lunch	☐ Gold \$16,000 <i>Choose ONE</i> ☐ Welcome Reception ☐ Meeting App ☐ Tote Bags	☐ Product Theater* \$35,000	☐ Ambassador ~~\$50,000~~ SOLD
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* Product Theater includes a one-hour time slot offered by TNS during breakfast or dinner and basic AV (mic, podium, and screen). The fee also includes the Standard Exhibitor/Display so your company can be represented in Austin, TX on Feb 4-7, 2027.

2027 ANNUAL SUMMER CONFERENCE EXHIBITOR OPPORTUNITIES

☐ Standard \$5,500	☐ Bronze \$11,000 <i>Choose ONE</i> ☐ Coffee Break	☐ Silver \$13,500 <i>Choose ONE</i> ☐ Continental Breakfast ☐ Friday Lunch	☐ Gold \$16,000 <i>Choose ONE</i> ☐ Welcome Reception ☐ Meeting App ☐ Tote Bags	☐ Product Theater* \$35,000	☐ Ambassador \$50,000
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* Product Theater includes a one-hour time slot offered by TNS during breakfast or dinner and basic AV (mic, podium, and screen). The fee also includes the Standard Exhibitor/Display so your company can be represented in San Antonio, TX on Jul 23-24, 2027.

PAYMENT OPTIONS

Cancellation requests must be sent to exhibits@cameroams.com no later than January 8, 2027 (Winter Conference) and July 2, 2027 (Summer Conference) to receive a full refund.

☐ PAYMENT BY CREDIT CARD — To pay by credit card, please complete the Exhibitor Application online at www.texasneurologist.org

☐ PAYMENT BY CHECK Mail to: Texas Neurological Society, 15511 Hwy 71 West, PMB 256, Austin, TX 78738

Email form to: exhibits@cameroams.com or mail to: Texas Neurological Society, 15511 Hwy 71 West, PMB 256, Austin, TX 78738

PAYMENT DEADLINE

In exchange for payment in full for the exhibit space contracted by the Exhibitor, TNS will provide exhibit space as outlined in the Exhibitor Regulations. For the Winter Conference, payment in full is due by Jan 8, 2027 and the Summer Conference, July 2, 2027. It is not necessary to send payment with this application form, but payment must be received by the established deadline(s).

QUALIFICATIONS OF AN EXHIBITORS

TNS show management will, in its sole discretion, determine whether a prospective Exhibitor is eligible to participate in the TNS show(s). Exhibitors shall be limited to those whose products or services are related to neurology, medical, professional, or practice interests. The TNS reserves the right to refuse to provide exhibit space to any Exhibitor not compatible with the general character and objectives of the

TNS show(s), or if the TNS show(s) is full upon receipt of the application.

CANCELLATION DEADLINE

A full refund will be made to the exhibitor only if written notice is received by January 8, 2027 for the Winter Conference and July 2, 2027 for the Summer Conference.

If, after the contract is entered into, the TNS fails or is unable to provide an Exhibitor with the opportunity to exhibit at the TNS show(s), due to fire, strikes, authority of the law, act of God or any other cause or reason, and the Exhibitor is not responsible for such failure, the Exhibitor's sole and exclusive remedy shall be the return of all monies that is has paid in connect with the Application/Contract. In such case, the TNS shall bear no further liability or responsibility under such agreement.

EXHIBITOR AGREES TO BE RESPONSIBLE FOR HIS/HER OWN PROPERTY. EXHIBITOR SHALL RELEASE AND HOLD HARMLESS AND INDEMNIFY TEXAS NEUROLOGICAL SOCIETY FROM ANY AND ALL CLAIMS OBLIGATIONS, LIABILITIES, CAUSES OF ACTION, LAWSUITS, DAMAGES,

EXHIBITOR AGREES TO BE RESPONSIBLE FOR HIS/HER OWN PROPERTY. EXHIBITOR SHALL RELEASE AND HOLD HARMLESS AND INDEMNIFY TEXAS NEUROLOGICAL SOCIETY FROM ANY AND ASSESSMENTS, INCLUDING LEGAL FEES THAT RESULTS FROM AN ALLEGATION OF NEGLIGENCE ON THE PART OF THE EXHIBITOR OF THE TEXAS NEUROLOGICAL SOCIETY OR THIRD PARTIES IN USE OF THE EXHIBIT SPACE OR ACTIVITIES IN CONNECTION WITH THE USE OF THE EXHIBIT SPACE.

ACCEPTANCE OF APPLICATION

Acceptance of this application as an agreement between the Exhibitor and the Texas Neurological Society will occur only when an official confirmation packet has been sent by TNS. It is understood that disapproval of an Exhibitor, per the terms outlined in the Exhibitor Regulations, will result in termination of the agreement without penalty to either party.

EXHIBITOR REGULATIONS AGREEMENT

The undersigned acknowledges and agrees to the Exhibitor Regulations as published by the Texas Neurological Society (available at www.texasneurologist.org or upon request) which are considered to be part of this agreement between the Exhibitor and the Texas Neurological Society.

WARRANTY OF AUTHORIZATION

The Exhibitor and person signing this application on its behalf represent and warrant that the undersigned person is a duly authorized and appointed agent of the Exhibitor, is fully empowered to bind the exhibitor to all provisions contained in this agreement.

QUESTIONS?

TNS Exhibits Manager

exhibits@cameroams.com

(512) 887-3875

www.texasneurologist.org

PLEASE SIGN

Title _____ Date _____

Signature _____

Company _____

Please email form to: exhibits@cameroams.com OR mail to: Texas Neurological Society, 15511 Hwy 71 West, PMB 256, Austin, TX 78738