

APPLICATION AND CONTRACT FOR INNOVATION THEATER

2024 NIGP Forum
 Conference Dates – August 25-28, 2024
 Exhibit Dates – August 25-26, 2024
 Charlotte Convention Center
 Charlotte, NC



Contact Information

Company Name.....
 Contact..... Title.....
 Tel..... Fax.....
 Email..... Website.....
 Address.....
 City..... State..... Zip..... Country.....
Billing Contact (if different from the above): Name.....Email.....
 Address.....Phone.....

NIGP Innovation Theater

Innovation Theater - \$3,500

Total Cost: \$ _____

Payment Information

Cancellation/Decrease Penalties

Initials	Deposit and Payment Schedule
	Due with application – 100%
Innovation Theater will not be held or confirmed without deposit. Failure to make payments does not release the contracted or financial obligation of Exhibitor.	

Cancellation/Decrease Penalties	Initials
Until April 25, 2024 – 50%	
After April 25, 2024 – 100%	

Make checks payable to: NIGP

Submit application to:
 Email: expocontracts@spargo.com

Mail payments to:
 NIGP- National Inst of Governmental Purchasing ♦ ATTN: Exhibit Management
 440 Monticello Avenue, Suite 1802
 PMB 63452
 Norfolk, VA 23510-2610

Need Help? Contact:
nigpexhibits@spargo.com
 888-744-1449

Credit Card Payments:
 An invoice will be sent via email to the primary contact (or billing contact if applicable) listed above. Please follow the payment instructions listed within the email on how to access and pay your invoice. You can also call NIGP to make payment at 703-736-8900 ext 0. Please provide your invoice number at the time of payment.

I, the undersigned, hereby make Application for Innovation Theater, at NIGP 2024. I am an authorized representative of the company/organization with the full power and authority to sign and deliver this application. The company/organization listed on this application agrees to comply with the NIGP 2024 Rules and Regulations and all policies, adopted by the National Institute for Government Purchasing hereafter. Exhibitor agrees to receive all written and electronic correspondence from NIGP, SPARGO, Inc. and official event contractors in reference to NIGP 2024 and future NIGP events. This application will become a contract upon Exhibitor's authorized signature and NIGP's acceptance and approval.

Exhibitor Signature..... Date.....
 Printed Name..... Telephone.....

NIGP Innovation Theater

Session Title: _____

Session Description (150 words or less): _____

Session Speaker Name and Title: _____
