EXHIBITOR CONTRACT - INDIAN ARTS & CRAFTS ONLY

<table>
<thead>
<tr>
<th>Booth Number</th>
<th>Payment</th>
<th>Booth Number</th>
<th>Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**BOOTH**

- **Name of Exhibiting Company:** COVENANT
- **Mailing Address:**
  - City:
  - State:
  - Zip Code:
- **Website:**
- **Telephone:**
- **Fax:**

**PAYMENT**

- **FOR ONE DAY ONLY  TUESDAY, FEBRUARY 23, 2016**
- **TOTAL:** 

- **$200 - Indian Arts & Crafts - ONLY** [Space to include 1 table and 2 chairs]

**COVENANT**

This application for exhibit space was made and entered into on this _________ day of ________, 2016, by and between The National Congress of American Indians, hereinafter referred to as “NCAI,” and __________________________, hereinafter referred to as “Exhibitor.” Application for space and its acceptance constitutes a contract to use the space assigned. NCAI retains the right to assign and/or change exhibit locations for the best interests of the Organization. The Exhibitor indemnifies and agrees to hold harmless NCAI and the Capital Hilton, their officers, directors, employees, and agents, from and against any actions, losses, costs, damages, claims, and expenses (including attorney's fees) arising from any damage to property or bodily injury to Exhibitor, his agents, representatives, employees by reason of the Exhibitor's occupancy or use of the exhibition facilities. In accordance with these rules and regulations governing exhibits for the 2016 Executive Council Winter Session - February 23, 2016, ONE DAY ONLY the undersigned makes application for exhibit space and encloses the full fee for each space requested.

**METHOD OF PAYMENT**

- **To Pay by Credit Card please contact Bernida Humetewa directly - [505]867-0203**
- **Enclosed is a check or money order payable to The National Congress of American Indians**

**ADDITIONAL NAME BADGES**

**FURTHER INFORMATION**

- **Contact Bernida Humetewa at [505] 867-0203 or by email to bhumetewa@ncai.org or visit the website at www.ncai.org**

**MAILING INFORMATION**

- **MAIL PAYMENT TO:** NATIONAL CONGRESS OF AMERICAN INDIANS
  - 1516 P St. NW
  - Washington, DC 20005

**FOR NCAI STAFF USE ONLY** (Please do not write below this line)

- **TOTAL PAYMENT RECEIVED:**
- **RECEIVED BY:**
- **CREDIT CARD AUTHORIZATION NUMBER:**
- **DATE:**
- **CHECK NUMBER:**

---

**Convention Registration Fees are not included in Exhibitor Contract Fees.**

---

**Convention Registration Fees are not included in Exhibitor Contract Fees.**