

Booth Space Application

General Conference Information



Special Instructions

Return all forms to:

NACDS

P.O. Box 34814

Alexandria, VA 22334-0814

- Mail your forms via the U.S. Postal Service First Class or Priority Mail only. (Other overnight mail services such as FedEx, UPS, etc. cannot deliver to this address.)
- Payment for the full amount must accompany your completed form(s) before your booth space application will be processed.
- Individual registration fees may be paid by check or credit card. Faxed or emailed registrations paid by credit card will be accepted.
- Booth registration fees may be paid by check or credit card.
- All checks should be payable to "NACDS."
- All exhibitors will be emailed a conference confirmation.
- Badges will be available onsite and are not provided in advance.
- Please read the "Rules and Regulations" in their entirety on the Total Store Expo website:
Go To tse.nacds.org
Select "Exhibit" from the menu at the top of the page
Select "Booth Information" from the drop down menu
Scroll down to "Rules and Regulations"

Online registration is available at
tse.nacds.org

Important Dates & Deadlines

Cancellation Refund Schedule

Company Letter or Booth Cancellation Form	received by December 31, 2017	Refund in full less an administrative fee equal to 10% of the total contracted price.
Company Letter or Booth Cancellation Form	received January 1 - March 30, 2018	Refund in full less an administrative fee equal to 25% of the total contracted price.
Company Letter or Booth Cancellation Form	received March 31, 2018 or beyond	No refund will be given.

Hotel Reservations

July 19, 2018

After this date, all quoted hotel rates and availability cannot be guaranteed.

Hotel Cancellation

July 19, 2018

Last day to cancel a room reservation without penalty.

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Need Help? Please email your questions to:

- **Exhibits:** Exhibits@NACDS.org
Booth questions, completing form, general information.
- **Registration:** Registration@NACDS.org
Individual registration, general information, changes and cancellations.
- **Housing:** Housing@NACDS.org
NACDS is the official housing bureau for the Total Store Expo Conference. All booth personnel must be registered for the conference. Hotel reservation options will be made available at the time of registration. Availability and special rates for Total Store Expo registrants will be offered until **Thursday, July 19, 2018**, therefore it is highly recommended you register prior to this date.

To register for the Total Store Expo Conference, please go to tse.nacds.org and click on "Exhibit", then "Exhibitor Registration".

If you have questions, please contact the Housing Hotline at 703-837-4301.

- **Conference Cancellation and Substitution**
All individual cancellations and substitutions must be submitted in writing. These forms are available on the Total Store Expo website, tse.nacds.org. Select "Exhibit" then "Exhibitor Registration" on the top menu, and then "Substitutions and Cancellations" on the left menu. Completed forms should be faxed to (703) 683-5678.
- **Booth Cancellation**
All booth cancellations must be submitted in writing. Exhibitors who are unable to occupy and use the contracted exhibit space, should forward a completed Booth Cancellation Form or a letter to the NACDS Exhibits Department. Cancellation form or letters may be emailed to exhibits@NACDS.org or faxed to NACDS Exhibits Department at (703) 683-5678.

Upon NACDS receipt of the completed booth space cancellation form or letter, booth fees will be refunded per the following schedule:

- Companies whose cancellation form **is received on or before December 31, 2017** will be refunded in full, **less an administration fee equal to 10% of the total contracted price.**
- Companies whose cancellation form **is received between January 1, 2018 and March 30, 2018** will be refunded in full, **less an administration fee equal to 25% of the total contracted price.**
- Companies whose cancellation form is received **on or after March 31, 2018 will forfeit any refund.**
- Downgrades in booth size received in writing **on or before March 30, 2018** will be refunded the difference in cost, **less 25% administrative fee, which will apply to the difference between that of the original booth size and the cost of the new size.** Downgrades in booth size received **on or after March 31, 2018** will not be subject to a refund.
- **New:** NACDS reserves the right to relocate downgraded booth spaces to a more suitable location in the exhibit hall.
- Exhibitors who fail to attend, forfeit the entire booth fee.

The booth cancellation form is located on the Total Store Expo website, tse.nacds.org. Select the "Exhibit" tab from the top menu, choose "Booth Information" from the drop down box and then select "Booth Space Cancellation" on the left menu.

Note: To cancel or substitute the registration of a company individual or booth personnel, you must submit the request in writing. See the "Conference Cancellation & Substitutions" section above for more information.

Booth Space Application



TOTAL STORE EXPO NACDS
August 25 - 27, 2018 • Denver, CO

Company _____

Exhibit Hall Booth Fees

Booth personnel must register separately using the Associate/Supplier Registration Form.

NACDS Member

Booth fees includes one complimentary registrant per 100 square feet purchased.

Booth	Square Feet	Inline	Corner**
10 x 10	100	o \$6,000	o \$6,500
10 x 20	200	o \$12,000	o \$14,400
10 x 30	300	o \$18,000	o \$21,600
10 x 40	400	o \$24,000	o \$28,800
20 x 20	400	o \$29,600	
20 x 30	600	o \$43,800	
20 x 40	800	o \$57,600	
20 x 50	1000	o \$71,000	
20 x 60	1200	o \$82,800	
20 x 70	1400	o \$95,200	
30 x 30	900	o \$63,900	
30 x 40	1200	o \$82,800	
30 x 50	1500	o \$102,000	
40 x 40	1600	o \$107,200	
40 x 50	2000	o \$132,000	
50 x 50	2500	o \$155,000	

** Limited Availability

Non-member

Booth	Square Feet	Inline	Corner
10' x 10'	100	o \$9,575	o \$11,725

*Non-member companies are limited to 10'x 10' square foot space.

Membership

To discuss benefits of membership, please call the NACDS Exhibits Department at (703) 837-4320.

Private Meeting Space

Private Meeting Space is only available for companies reserving a booth. Please indicate the number of Private Meeting Spaces you would like to reserve.

_____ 13' x 13' \$11,232
_____ 13' x 26' \$22,464

See Item #10 of the "Rules and Regulations" at tse.nacds.org/exhibit/booth-information, for Private Meeting Space requirements and restrictions.

Payment Method Credit Card Check

Credit Card    

Credit Card # _____

Exp. Date _____

CVV# _____

Authorized Purchase Amount _____

Name _____

Signature _____

Important Note: Access to the exhibit hall is contingent upon all fees (including booth, registration and NACDS membership fees) being paid in full.

Manufacturer Agent Yes No

- Please complete this form in its entirety.
- Make checks payable to "NACDS" and return to the address listed above.
- Read all "Rules & Regulations" online at tse.nacds.org/exhibit/booth-information.

Exhibit Questions

Contact the NACDS Exhibits Department at Exhibits@nacds.org or (703) 837-4320.

Email, Fax or Mail Completed Form to:

Email: exhibits@nacds.org

Fax: (703) 683-5678

Mail: NACDS, P.O. Box 38814, Alexandria, VA, 22334-0814

Date	Amount	Check #
Co. ID	Entered	Proofed

FOR NACDS USE ONLY

Booth Space Application



Company Information

First-Time Exhibitor? Yes No

Company _____

Address _____

City _____ State _____

Zip _____ Country _____

Phone _____ Ext. _____ Fax _____

Company Website Address _____

Booth Logistics Coordinator

Please provide the name of your company's Booth Logistics Coordinator. This person is responsible for Booth Logistics (i.e., shipping, set-up, move-out, booth amenities) and is the individual who should receive the exhibitor kit. (List only an employee of your company. I&D companies may receive duplicate information if requested separately.)

Name _____ Title _____

Address (if different from above) _____

City _____ State _____

Zip _____ Country _____

Phone _____ Ext. _____ Fax _____

E-mail _____

Conference Appointment Contact

Name _____ Title _____

Phone _____ Ext. _____ Fax _____

E-mail _____

Billing Contact

Name _____ Title _____

Phone _____ Ext. _____ E-mail _____

Individual Completing Form

Name _____ Title _____

Phone _____ Ext. _____ E-mail _____

Authorizing Individual

On behalf of the exhibiting company, the undersigned individual, who has the authority to ratify this exhibit contract, has read and accepts all conditions of the NACDS "Rules & Regulations" located online at tse.nacds.org/exhibit/booth-information.

Name _____ Title _____

Signature _____ Date _____

Federal Tax ID# 13-5582579

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Company

For product information, please check the appropriate box(es) to indicate the groups of products or services that apply to your company. Choose Brand Name and/or Store Brand for each product.

BRAND NAME	STORE BRAND		BRAND NAME	STORE BRAND	
<input type="checkbox"/>	<input type="checkbox"/>	Baby Care	<input type="checkbox"/>	<input type="checkbox"/>	General Merchandise - cont.
<input type="checkbox"/>	<input type="checkbox"/>	Baby OTC	<input type="checkbox"/>	<input type="checkbox"/>	Books, Paperbacks
<input type="checkbox"/>	<input type="checkbox"/>	Baby Toiletries	<input type="checkbox"/>	<input type="checkbox"/>	Calendars
<input type="checkbox"/>	<input type="checkbox"/>	Diapers	<input type="checkbox"/>	<input type="checkbox"/>	Camping
<input type="checkbox"/>	<input type="checkbox"/>	Feeding and Nursing	<input type="checkbox"/>	<input type="checkbox"/>	Cellular
<input type="checkbox"/>	<input type="checkbox"/>	Gear and Novelties	<input type="checkbox"/>	<input type="checkbox"/>	Clocks
<input type="checkbox"/>	<input type="checkbox"/>	Infant Formula	<input type="checkbox"/>	<input type="checkbox"/>	Closet Organizers and Accessories
		Consumables	<input type="checkbox"/>	<input type="checkbox"/>	Computer Accessories
<input type="checkbox"/>	<input type="checkbox"/>	Baby Food	<input type="checkbox"/>	<input type="checkbox"/>	Consumer Electronics
<input type="checkbox"/>	<input type="checkbox"/>	Beverages (Alcoholic)	<input type="checkbox"/>	<input type="checkbox"/>	Consumer Magazines
<input type="checkbox"/>	<input type="checkbox"/>	Beverages (Non-Alcoholic)	<input type="checkbox"/>	<input type="checkbox"/>	Electric Razors
<input type="checkbox"/>	<input type="checkbox"/>	Candy	<input type="checkbox"/>	<input type="checkbox"/>	Fans
<input type="checkbox"/>	<input type="checkbox"/>	Dairy Products	<input type="checkbox"/>	<input type="checkbox"/>	File Cabinets/Safes
<input type="checkbox"/>	<input type="checkbox"/>	Deli	<input type="checkbox"/>	<input type="checkbox"/>	Fire Logs
<input type="checkbox"/>	<input type="checkbox"/>	Dry Grocery (DSD)	<input type="checkbox"/>	<input type="checkbox"/>	Footwear
<input type="checkbox"/>	<input type="checkbox"/>	Dry Grocery/Warehoused Convenience Foods (Non-DSD)	<input type="checkbox"/>	<input type="checkbox"/>	Furniture (Home, Office and Computer)
<input type="checkbox"/>	<input type="checkbox"/>	Energy Products (Shots, Bars, Tablets)	<input type="checkbox"/>	<input type="checkbox"/>	Giftware
<input type="checkbox"/>	<input type="checkbox"/>	Fresh Food	<input type="checkbox"/>	<input type="checkbox"/>	Giftwrap
<input type="checkbox"/>	<input type="checkbox"/>	Frozen Food	<input type="checkbox"/>	<input type="checkbox"/>	Greeting Cards
<input type="checkbox"/>	<input type="checkbox"/>	Gum	<input type="checkbox"/>	<input type="checkbox"/>	Hardware
<input type="checkbox"/>	<input type="checkbox"/>	Pet Food	<input type="checkbox"/>	<input type="checkbox"/>	Home Décor
<input type="checkbox"/>	<input type="checkbox"/>	Snacks (Warehoused, Non-DSD)	<input type="checkbox"/>	<input type="checkbox"/>	Home Textiles/Domestics
<input type="checkbox"/>	<input type="checkbox"/>	Snacks and Chips (DSD)	<input type="checkbox"/>	<input type="checkbox"/>	Hosiery
<input type="checkbox"/>	<input type="checkbox"/>	Tobacco Products and Smoking Accessories	<input type="checkbox"/>	<input type="checkbox"/>	Housewares
		Cosmetics & Fragrances	<input type="checkbox"/>	<input type="checkbox"/>	Insulated Chests, Jars, Vacuum Bottles, Lunch Kits
<input type="checkbox"/>	<input type="checkbox"/>	Cosmetic Accessories	<input type="checkbox"/>	<input type="checkbox"/>	Jewelry
<input type="checkbox"/>	<input type="checkbox"/>	Cosmetic Bags and Organizers	<input type="checkbox"/>	<input type="checkbox"/>	Kitchen Goods/Textiles
<input type="checkbox"/>	<input type="checkbox"/>	Cosmetics	<input type="checkbox"/>	<input type="checkbox"/>	Lamps/Lamp Accessories
<input type="checkbox"/>	<input type="checkbox"/>	Ethnic Cosmetics	<input type="checkbox"/>	<input type="checkbox"/>	Lawn and Garden Supplies
<input type="checkbox"/>	<input type="checkbox"/>	Nail Care and Accessories	<input type="checkbox"/>	<input type="checkbox"/>	Leather Goods
<input type="checkbox"/>	<input type="checkbox"/>	Perfumes and Fragrances	<input type="checkbox"/>	<input type="checkbox"/>	Light Bulbs
		Front End Services	<input type="checkbox"/>	<input type="checkbox"/>	Luggage
<input type="checkbox"/>	<input type="checkbox"/>	Database and Information Vendors	<input type="checkbox"/>	<input type="checkbox"/>	Pesticides
<input type="checkbox"/>	<input type="checkbox"/>	Financial/Computer Systems	<input type="checkbox"/>	<input type="checkbox"/>	Pet Supplies
<input type="checkbox"/>	<input type="checkbox"/>	Human Resources/Personnel	<input type="checkbox"/>	<input type="checkbox"/>	Pre-Paid Gift Cards
<input type="checkbox"/>	<input type="checkbox"/>	In-Store Marketing	<input type="checkbox"/>	<input type="checkbox"/>	Pre-Paid Phone Cards
<input type="checkbox"/>	<input type="checkbox"/>	Insurance Brokers/Agency	<input type="checkbox"/>	<input type="checkbox"/>	Rainwear, Gear and Accessories
<input type="checkbox"/>	<input type="checkbox"/>	Marketing/Consulting Service	<input type="checkbox"/>	<input type="checkbox"/>	Reading and Sun Glasses
<input type="checkbox"/>	<input type="checkbox"/>	Packaging Services	<input type="checkbox"/>	<input type="checkbox"/>	Sewing
<input type="checkbox"/>	<input type="checkbox"/>	Point-of-Purchase Displays/ Store Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	Shoe Care
<input type="checkbox"/>	<input type="checkbox"/>	Store Fixtures and Equipment	<input type="checkbox"/>	<input type="checkbox"/>	Sporting Goods/Athletics
<input type="checkbox"/>	<input type="checkbox"/>	Store Protection/Security	<input type="checkbox"/>	<input type="checkbox"/>	Stationery/Stationery Supplies (Home, Office & School Supplies)
<input type="checkbox"/>	<input type="checkbox"/>	Trade Magazines	<input type="checkbox"/>	<input type="checkbox"/>	Toys, Games and Playing Cards
		General Merchandise	<input type="checkbox"/>	<input type="checkbox"/>	Travel Aids
<input type="checkbox"/>	<input type="checkbox"/>	Apparel	<input type="checkbox"/>	<input type="checkbox"/>	Vacuum Bags
<input type="checkbox"/>	<input type="checkbox"/>	Appliances	<input type="checkbox"/>	<input type="checkbox"/>	Watches
<input type="checkbox"/>	<input type="checkbox"/>	As Seen on TV			Healthcare/OTC
<input type="checkbox"/>	<input type="checkbox"/>	Audio/Video (Blank)	<input type="checkbox"/>	<input type="checkbox"/>	Air Cleaners
<input type="checkbox"/>	<input type="checkbox"/>	Audio/Video (Pre-Recorded)	<input type="checkbox"/>	<input type="checkbox"/>	Allergy
<input type="checkbox"/>	<input type="checkbox"/>	Automobile Supplies & Accessories	<input type="checkbox"/>	<input type="checkbox"/>	Analgesics (External)
<input type="checkbox"/>	<input type="checkbox"/>	Bicycle Accessories	<input type="checkbox"/>	<input type="checkbox"/>	Analgesics (Internal)
			<input type="checkbox"/>	<input type="checkbox"/>	Aromatherapy
			<input type="checkbox"/>	<input type="checkbox"/>	Contraception/Family Planning

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August 25 - 27, 2018 • Denver, CO

Company

For product information, please check the appropriate box(es) to indicate the groups of products or services that apply to your company. Choose Brand Name and/or Store Brand for each product.

- | BRAND NAME | STORE BRAND | |
|--------------------------|--------------------------|--|
| | | Healthcare/OTC - cont. |
| <input type="checkbox"/> | <input type="checkbox"/> | Cough and Cold |
| <input type="checkbox"/> | <input type="checkbox"/> | Diet Aids |
| <input type="checkbox"/> | <input type="checkbox"/> | Digestives/Antigas/Antidiarrheal |
| <input type="checkbox"/> | <input type="checkbox"/> | Dose Aids |
| <input type="checkbox"/> | <input type="checkbox"/> | Ear Accessories |
| <input type="checkbox"/> | <input type="checkbox"/> | Ear Medications |
| <input type="checkbox"/> | <input type="checkbox"/> | Eye/Contact Lens Care |
| <input type="checkbox"/> | <input type="checkbox"/> | First Aid/Wound Care |
| <input type="checkbox"/> | <input type="checkbox"/> | Foot Care |
| <input type="checkbox"/> | <input type="checkbox"/> | Healthcare Appliances (Heating Pads, Massagers, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Humidifiers |
| <input type="checkbox"/> | <input type="checkbox"/> | Incontinence Products |
| <input type="checkbox"/> | <input type="checkbox"/> | Lip Care |
| <input type="checkbox"/> | <input type="checkbox"/> | Liquid Adult Nutritionals |
| <input type="checkbox"/> | <input type="checkbox"/> | Natural Health and Wellness |
| <input type="checkbox"/> | <input type="checkbox"/> | Nutrition Bars |
| <input type="checkbox"/> | <input type="checkbox"/> | Ointments |
| <input type="checkbox"/> | <input type="checkbox"/> | Pediculicides and Accessories |
| <input type="checkbox"/> | <input type="checkbox"/> | Personal Lubricants/Intimacy Products |
| <input type="checkbox"/> | <input type="checkbox"/> | Sleep Aids |
| <input type="checkbox"/> | <input type="checkbox"/> | Smoking Cessation Products |
| <input type="checkbox"/> | <input type="checkbox"/> | Sports Nutritionals |
| <input type="checkbox"/> | <input type="checkbox"/> | Thermometers |
| <input type="checkbox"/> | <input type="checkbox"/> | Vaporizers |
| <input type="checkbox"/> | <input type="checkbox"/> | Vitamins, Minerals and Supplements |
| <input type="checkbox"/> | <input type="checkbox"/> | Women's Health/Feminine Hygiene |
| | | Home Healthcare |
| <input type="checkbox"/> | <input type="checkbox"/> | Diabetic Care (Supplies and Devices) |
| <input type="checkbox"/> | <input type="checkbox"/> | Durable Medical Equipment (Bath Safety/Mobility Aids) |
| <input type="checkbox"/> | <input type="checkbox"/> | Home Diagnostics |
| <input type="checkbox"/> | <input type="checkbox"/> | Home Healthcare—Other Supplies and Equipment |
| <input type="checkbox"/> | <input type="checkbox"/> | Home Infusion Supplies |
| <input type="checkbox"/> | <input type="checkbox"/> | Ostomy Supplies |
| <input type="checkbox"/> | <input type="checkbox"/> | Pillows (Therapeutic) |
| <input type="checkbox"/> | <input type="checkbox"/> | Sports Wraps, Supports, Trusses and Elastic Stockings |
| | | Household Products/Non-Edible Consumables |
| <input type="checkbox"/> | <input type="checkbox"/> | Air Fresheners |
| <input type="checkbox"/> | <input type="checkbox"/> | Bags/Wraps |
| <input type="checkbox"/> | <input type="checkbox"/> | Home Fragrance (Incense, Scented Oils, Reed Diffusers, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Household Chemicals |
| <input type="checkbox"/> | <input type="checkbox"/> | Household Cleaning Supplies |
| <input type="checkbox"/> | <input type="checkbox"/> | Insect Repellent |
| <input type="checkbox"/> | <input type="checkbox"/> | Paper Products |
| <input type="checkbox"/> | <input type="checkbox"/> | Rubber Gloves |
| | | Merchandise Programs |
| <input type="checkbox"/> | <input type="checkbox"/> | Close-Out Merchandise |
| <input type="checkbox"/> | <input type="checkbox"/> | Dollar Program Merchandise |

- | BRAND NAME | STORE BRAND | |
|--------------------------|--------------------------|--|
| | | Personal Care/HBC |
| <input type="checkbox"/> | <input type="checkbox"/> | Bar Soap, Bath Care and Accessories |
| <input type="checkbox"/> | <input type="checkbox"/> | Body Washes |
| <input type="checkbox"/> | <input type="checkbox"/> | Deodorants/Antiperspirants |
| <input type="checkbox"/> | <input type="checkbox"/> | Depilatories (Hair Removal) |
| <input type="checkbox"/> | <input type="checkbox"/> | Ethnic Hair Care |
| <input type="checkbox"/> | <input type="checkbox"/> | Ethnic Skin Care |
| <input type="checkbox"/> | <input type="checkbox"/> | Facial Skin Care |
| <input type="checkbox"/> | <input type="checkbox"/> | Hair Accessories |
| <input type="checkbox"/> | <input type="checkbox"/> | Hair Care |
| <input type="checkbox"/> | <input type="checkbox"/> | Hair Care Appliances |
| <input type="checkbox"/> | <input type="checkbox"/> | Hair Color |
| <input type="checkbox"/> | <input type="checkbox"/> | Hand Sanitizer |
| <input type="checkbox"/> | <input type="checkbox"/> | Oral Hygiene |
| <input type="checkbox"/> | <input type="checkbox"/> | Shaving Preparations and Accessories |
| <input type="checkbox"/> | <input type="checkbox"/> | Skin Care Products and Lotions (Female) |
| <input type="checkbox"/> | <input type="checkbox"/> | Skin Care Products and Lotions (Male) |
| <input type="checkbox"/> | <input type="checkbox"/> | Sun Care Products |
| <input type="checkbox"/> | <input type="checkbox"/> | Trial Size |
| | | Photo |
| <input type="checkbox"/> | <input type="checkbox"/> | Albums and Frames |
| <input type="checkbox"/> | <input type="checkbox"/> | Batteries/Flashlights |
| <input type="checkbox"/> | <input type="checkbox"/> | Photo (Camera, Film, Supplies and Photo Finishing) |
| | | Seasonal |
| <input type="checkbox"/> | <input type="checkbox"/> | Christmas Boxed Cards/Gift Wrap |
| <input type="checkbox"/> | <input type="checkbox"/> | Garden Chemicals/Fertilizers |
| <input type="checkbox"/> | <input type="checkbox"/> | Garden Compound |
| <input type="checkbox"/> | <input type="checkbox"/> | Garden Decor |
| <input type="checkbox"/> | <input type="checkbox"/> | Garden Tools/Watering |
| <input type="checkbox"/> | <input type="checkbox"/> | Grills/Bar-B-Que |
| <input type="checkbox"/> | <input type="checkbox"/> | Inflatables/Squirt Guns |
| <input type="checkbox"/> | <input type="checkbox"/> | Live Goods |
| <input type="checkbox"/> | <input type="checkbox"/> | Pool and Spa Chemicals |
| <input type="checkbox"/> | <input type="checkbox"/> | Seasonal Plush Toys |
| <input type="checkbox"/> | <input type="checkbox"/> | Seasonal Sundries (Valentine, Easter, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Summer Lawn Furniture |
| <input type="checkbox"/> | <input type="checkbox"/> | Trim-a-Tree/Trees/Lights/Decor |
| <input type="checkbox"/> | <input type="checkbox"/> | Winter Seasonal-Automotive |
| <input type="checkbox"/> | <input type="checkbox"/> | Winter Seasonal- Hats/Gloves |
| | | Pharmacy Operations Equipment and Services |
| <input type="checkbox"/> | <input type="checkbox"/> | Medicare Part D |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Automation |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy B2B E-Commerce Products and Services |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Benefit Management Services |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Care/Disease State Management Companies |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Clinical/Marketing Programs |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Compounding Products and Services |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Computer Dispensing/Patient Care Management Systems |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Computer Hardware |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Database and Information Vendors |
| <input type="checkbox"/> | <input type="checkbox"/> | Pharmacy Drive-Thru Window Suppliers |

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Company

For product information, please check the appropriate box(es) to indicate the groups of products or services that apply to your company. Please indicate if it is a Brand Name product, if applicable.

- BRAND NAME
- ### Pharmacy Operations Equipment and Services - cont.
- Pharmacy Integrated Voice Response Systems
 - Pharmacy Inventory Management Systems
 - Pharmacy Point-of-Sale (POS)
 - Pharmacy Prescription Clearinghouses (Switch Companies)
 - Pharmacy Prescription Processing Supplies and Containers
 - Pharmacy Professional Education/Continuing Education Service Provider
 - Pharmacy Repackaging Equipment and Services
 - Pharmacy Reverse Logistics
 - Pharmacy Services – Other
 - Pharmacy Staffing Agencies
 - Pharmacy/Physician Connectivity Vendors
 - Retail Clinics

- BRAND NAME
- ### Pharmacy Products
- Biotechnology Pharmaceuticals
 - Brand Name Pharmaceuticals
 - Diabetic Care (Medicines)
 - Generic Pharmaceuticals
 - Patient Adherence Devices
 - Pharmacy Consumer Healthcare Publications
- ### Supply Chain
- Customer Service
 - Demand and Supply Planning
 - Inventory Management
 - Material Handling
 - Merchandise Programs
 - Logistics Planning and Modeling
 - Reverse Logistics Provider
 - Supply Chain Management
 - Transportation

Booth Preferences

1st _____ 3rd _____

2nd _____ 4th _____

We prefer that our booth NOT be located next to:

1st _____ 3rd _____

2nd _____ 4th _____

Other Special Requests

Top Products by Name

1 _____ 4 _____

2 _____ 5 _____

3 _____ 6 _____