

the SOUTHERN
HISTORICAL ASSOCIATION

2021

**The 87th Annual Meeting of the
Southern Historical Association**

**November 3-6, 2021
Astor Crowne Plaza
New Orleans, LA**

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Thank you for joining us at the 87th Annual Meeting of the Southern Historical Association! Press participation is invaluable to upholding our mission—promoting research and interest in southern history; the collection and preservation of the South’s historical records; the encouragement of state and local historical societies in the South; and the support and promotion of history education at all levels and in all fields throughout the region.

The 87th Annual Meeting of the Southern Historical Association will be held at the Astor Crowne Plaza (739 Canal Street at Bourbon, New Orleans, LA 70130), November 3-6, 2021. **Please note that this year’s meeting runs from Wednesday through Saturday.** This packet includes all of the details you need to reserve advertising space in our annual program and booth space in our exhibit hall.

Our headquarters hotel is located on the corner of Canal and Bourbon in New Orleans’s storied French Quarter. The exhibit space is amazing, bathed in natural light and lined on the long side by the verandas that make New Orleans justly famous.

Exhibit Hall Hours

Thursday, November 4	9:00 AM–4:30 PM
Friday, November 5	9:00 AM–4:30 PM
Saturday, November 6	8:30 AM–10:30 AM

Exhibits may be set up between 1:00 and 5:00 pm on Wednesday, November 3. Dismantlement begins at 12 pm on Saturday and should be completed by 4 pm. An Exhibitor Service Manual with rental furnishings, drayage, and shipping information will be sent to all publishers exhibiting at our meeting two months prior to the meeting. The official service contractor for the meeting is SS&G Management. April Moody (april.moody@ssgmanagement.net), our primary contact with SS&G, will be in touch with you later regarding other set-up options.

Enclosed you will find order details for booth(s) and ad(s), order forms, a credit card form, and a Safety and Property Damage Mitigation Statement.

I’d like to encourage you to consider including books for our affiliate organizations, especially our European, British, and Latin American History sections. Representatives of these affiliates have asked if we could urge presses to display books in their fields.

If you have any questions about registering for the event, please email me at berrys@thesha.org.

Sincerely,
Stephen Berry
Secretary-Treasurer

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ORDER DETAILS

EXHIBIT RATES	
Single booth	\$450.00
Two booths*	\$787.50
Three booths*	\$1125.00
Island*	\$1462.50

*A 25% discount applies to all additional booths after the first one (\$337.50 each).

This price includes an attractively draped booth with an 8' high back wall and a 3' high side rail drapery, and a one-line identification sign with exhibitor's name. Listing of name, representatives' names, and booth number(s) will be listed in the Program, **provided booth registration is made by July 15**. Programs and meeting registration are free to exhibit representatives. Enclosed is a Safety & Property Damage Mitigation statement that all representatives need to be familiar with. Payment is due in full within 30 days of signing.

IMPORTANT EXHIBIT ORDER DUE DATES

- July 15** Orders must be received (email berrys@thesha.org)
- July 15** Booth representative name(s) must be received (email berrys@thesha.org)

ADVERTISING RATES:	
Single page	\$350.00
Two-page spread	\$450.00
Four-page spread	\$700.00
Six-page spread	\$1150.00

All covers are previously reserved. The page size is 8.5 x 11, 133-line screen. Ads are accepted by email using PDF files. Our program is now full color. A minimum of 600 dpi is recommended when submitting camera-ready copy. Please submit press quality CMYK PDF. Payment is due in full within 30 days of signing.

IMPORTANT AD ORDER DUE DATES

- July 15** Orders must be received (email berrys@thesha.org)
- July 15** Deadline for ad copy (email berrys@thesha.org)

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SAFETY & PROPERTY DAMAGE MITIGATION

To prevent damages to hotel property, fixtures and surfaces, which are cause for action for casualty loss and damage claims assessed against the Association and our contractors, exhibitors are required to observe the following:

- Exhibitors are not permitted to move in exhibit freight through the hotel lobby, in passenger elevators, or through other back of house areas.
- No exhibitor-owned, wheeled material handling devices will be allowed in the hotel. They cause damages to walls, doors and flooring surfaces.
- Exhibitors are not allowed to be in Hotel Staff Work Area ever.
- To prevent damages to hotel property, fixtures, and surfaces, exhibitors are required to use the official convention contractor, SSG Management, for all freight shipments for both inbound and outbound exhibit freight handling. This protects all parties concerned and limits our exposure to liability.
- There are no exceptions.

UNAUTHORIZED BOOTH SHARING OR SUIT CASING:

Each Exhibiting Press must reserve and pay for booth space. No exhibitors under any circumstances will be allowed to share booth space. Suit casing: Any activity designed to solicit or sell products or services to attendee attending a meeting, conference, or event without the proper authorization from the event sponsor or in ways violating the rules of the event or exhibition. Any attendee who is observed to be soliciting business in the aisles or other public spaces, in another company's booth or in violation of any portion of the SHA Exhibitor Rules and Regulations will be asked to leave immediately. Additional penalties may be applied. Please report any violations you observe to show management.

Off-Site Activities are defined as the securing of meeting or exhibit space in any SHA contracted space or any property within the bounds of the city in which we meet without the express authorization of the Association with the implied or purposeful intent to draw Association Membership/Attendees away from our event or exposition. This again falls under the guise of Suit casing activities and will result in similar actions.

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Exhibit Space Contract

Exhibitor: _____

Address: _____

Street City State Zip Code

SELECT BOOTH OPTION:		
<input type="checkbox"/>	Single booth	\$450
<input type="checkbox"/>	Two booths	\$787.50
<input type="checkbox"/>	Three booths	\$1125.00
<input type="checkbox"/>	Island	\$1462.50

DEADLINES:

30 days of signing Payment due in full.

July 15 The convention program will list the names of publishers and up to five representatives for those whose orders are received by this date. There is no charge for this listing.

July 15 Booth representative name(s) due

Name _____

Representatives:

Signature _____

Title _____

Date _____

E-mail _____

Phone _____

Email to Stephen Berry at berrys@thesha.org

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Advertising Contract

Advertiser: _____

Address: _____
Street City State Zip Code

SELECT AD OPTION:		
<input type="checkbox"/>	Single page	\$350
<input type="checkbox"/>	Two-page spread	\$450
<input type="checkbox"/>	Four-page spread	\$700
<input type="checkbox"/>	Six-page spread	\$1150
<input type="checkbox"/>	_____	_____

AD SPECS:

Page size 8.5" (w) x 11" (h)

Full Color

133-line screen

Minimum of 600 dpi is recommended

Camera-ready copy

PDF file

DEADLINES:

30 days of signing

July 15

July 15

Payment due in full.

Orders due to berrys@thesha.org

Copy due to berrys@thesha.org

Name _____

Title _____

Signature _____

Date _____

Email _____

Phone _____

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Credit Card Authorization Form

Name _____

Address _____

*Name should be as it appears on the card; address should be the billing address.

E-mail (for receipt) _____

If paying by credit card, check one or both of the following:

SELECT BOOTH OPTION:		
<input type="checkbox"/>	Single booth	\$450
<input type="checkbox"/>	Two booths	\$787.50
<input type="checkbox"/>	Three booths	\$1125.00
<input type="checkbox"/>	Island	\$1462.50

SELECT AD OPTION:		
<input type="checkbox"/>	Single page	\$350
<input type="checkbox"/>	Two-page spread	\$450
<input type="checkbox"/>	Four-page spread	\$700
<input type="checkbox"/>	Six-page spread	\$1150
<input type="checkbox"/>	_____	_____

CREDIT CARD PAYMENT:

MasterCard Visa Discover

Card Number _____

Card CSC Code _____

(This is found on the back of your card, usually the last three digits, to verify you possess the card)

Card Expiration Date _____

Thank you for your payment. Please send payment to Stephen Berry at berrys@thesha.org.