

CDM's Annual Business Continuity Planning Conference EXHIBITOR APPLICATION & AGREEMENT

This application for exhibit space at CDM's Annual Business Continuity Planning Conference will also serve as an agreement between CDM and the company below hereinafter referred to as EXHIBITOR.

Exhibitor Name	
Billing Address	
City, State, Zip	
Telephone	
FAX	
Booth Coordinator <small>(Point of Contact)</small>	
Telephone <small>(Point of Contact)</small>	
E-mail Address <small>(Point of Contact)</small>	
Description of Product or Service <small>(As it should appear on flyer. Please include products to be displayed.)</small>	

1. **Exhibit Space Rental Fee:** **\$150.00** is postmarked by Nov. 6, 2002
 \$195.00 after Nov. 6, 2002 (CDM agrees to refund 50% of EXHIBITOR's registration fee if cancellation is received by CDM prior to Nov 6, 2002. No refund will be paid for cancellations received after Nov. 6, 2002.)

 Exhibitor's fee covers registration expenses for 1 person only. Additional exhibitor(s) may register for \$45.00 which includes conference materials, and food & beverages.

 CDM will provide one 2 ½ x 6 foot table and one chair.

2. **Conference Location:** Applied Materials, Inc., Augustine Conference Center
 2727 Augustine Drive, Santa Clara, CA 95054

3. **Assignment of Exhibit Space:** CDM will make every effort to comply with requests for assignment of exhibit space locations on a "first come – first served" basis for exhibitors that have returned their agreement and payment in full. CDM reserves the right to change exhibit space

assignments or make such modifications to the floor plan as may be necessary to meet the needs of CDM, EXHIBITOR, and the exhibits.

CDM will mail a confirmation letter including information on exhibit space, installation time & exhibit hours.

- 4. Loss or Damage of Exhibit Materials:** EXHIBITOR is solely responsible for any loss or damage of exhibit materials. All property of EXHIBITOR is understood to be in EXHIBITOR's custody and control in transit to and from or within the confines of the exhibit. EXHIBITOR agrees to indemnify and hold harmless the Collaborative for Disaster Mitigation and the San Jose State University Foundation for any loss or damage to exhibit materials.

Please indicate your preference for other exhibitors you would like to co-locate with, or avoid.

Please co-locate us with:	
Please avoid placing us near:	

I agree to the preceding terms and conditions.

<i>Signature</i>	<i>Company Name</i>	<i>Date</i>
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For additional information please contact: Jessica Tran (CDM Conference Coordinator) at (408) 924-3596 or jessica.tran@sjsu.edu

REGISTRATION FORM

Postmarked before Nov 6, 2002

- \$150 Exhibitor**
(includes registration for one person + one 2 ½' x 8' table and two chairs)
- \$45 Additional Representative**

Postmarked after Nov. 6, 2002

- \$195 Exhibitor** (No walk-ins)
- \$60 Additional Representative** (walk-ins okay)

	No.		Cost	=	Total
_____	_____	X	_____	=	_____
<i>(Exhibitor's Rep. Name)</i>					
_____	_____	X	_____	=	_____
<i>(Additional Rep. Name)</i>					

If you require special equipment, please contact Jessica Tran at: 408-924-3596.

TOTAL: _____

PAYMENT METHOD

- VISA MASTERCARD AMEX

Name on Card: _____
(if name on card is other than you, please attach authorization letter from cardholder)

Card No. _____ Exp. _____

- Check Enclosed / **Please make checks payable to: SJSU Foundation**

*****No Company PO's, please.*****

Mail Registration Form & Payment to:

Jessica Tran
Collaborative for Disaster Mitigation
c/o SJSU Dept. of Chem. & Mat. Engr.
One Washington Square
San Jose, CA 95192-0082