

# PASS Sponsor/Exhibitor Participation Application and Contract

Please Print Clearly

## COMPANY INFORMATION

Company: \_\_\_\_\_

Show Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ (ext.) \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail \_\_\_\_\_

Company URL: \_\_\_\_\_

Company name as it should appear on Booth signage:  
\_\_\_\_\_

Signature of Company Representative:  
\_\_\_\_\_

## SPONSORSHIP PACKAGES

- |   |   |
|---|---|
| <input type="checkbox"/> Platinum – \$40,000<br>Exhibit space 20' x 20' | <input type="checkbox"/> Gold – \$25,000<br>Exhibit space 10' x 20'     |
| <input type="checkbox"/> Silver – \$15,000<br>Exhibit space 10' x 10'   | <input type="checkbox"/> Exhibitor – \$4,000<br>Exhibit space 10' x 10' |

## ADDITIONAL EXHIBIT SPACE

Additional Booth Space Required \_\_\_\_\_

### For Internal Office Use Only

Add Booth % Discount \_\_\_\_\_ \$ \_\_\_\_\_  
 Add Booth % Discount \_\_\_\_\_ \$ \_\_\_\_\_  
 Add Booth % Discount \_\_\_\_\_ \$ \_\_\_\_\_  
 Total Additional Booths \_\_\_\_\_  
 Total Additional Space \$ \_\_\_\_\_

Please indicate booth location preference.

1. \_\_\_\_\_ 2. \_\_\_\_\_  
 3. \_\_\_\_\_ 4. \_\_\_\_\_

Please indicate any companies you do not wish to be next to.  
 (Accommodation is based on space availability and time)

1. \_\_\_\_\_ 2. \_\_\_\_\_  
 3. \_\_\_\_\_ 4. \_\_\_\_\_

## ADDITIONAL SPONSORSHIP & MARKETING OPPORTUNITIES

- |   |                                       |             |
|---|---------------------------------------|-------------|
| <input type="checkbox"/> Internet Pavilion        | \$20,000                              | (1)         |
| <input type="checkbox"/> Hardware Sponsor         | \$20,000                              | (1)         |
| <input type="checkbox"/> Attendee Badge Lanyard   | \$10,000                              | (1)         |
| <input type="checkbox"/> Summit Pen               | \$10,000                              | (1)         |
| <input type="checkbox"/> Directional Footprints   | \$5,000                               | (4)         |
| <input type="checkbox"/> Registration Bag Insert  | \$3,000                               | (15)        |
| <input type="checkbox"/> Cappuccino Cart          | \$3,000                               | (2 per day) |
| <input type="checkbox"/> Lunch Table Distribution | \$2,500                               | (2 per day) |
| <input type="checkbox"/> Sponsor Signs (3' x 8')  | \$2,000                               | (10)        |
| <input type="checkbox"/> PASSport to Prizes       | \$1,500                               | (16)        |
| <input type="checkbox"/> Exhibitor Raffles        | \$500                                 | (4)         |
|   | (scheduled during exhibit hall hours) |             |

**Total \$** \_\_\_\_\_

## ADVERTISEMENT OPPORTUNITIES

Summit Guide Advertisements

- |  |         |
|--|---------|
| <input type="checkbox"/> Summit Guide 4-Color Back Cover _____         | \$4,000 |
| <input type="checkbox"/> Summit Guide 4-Color Inside Back Cover _____  | \$3,000 |
| <input type="checkbox"/> Summit Guide 4-Color Inside Front Cover _____ | \$3,000 |
| <input type="checkbox"/> Summit Guide 1-Color Inside Full Page _____   | \$1,500 |

\* Please note: All participation options require a company logo. Logos must be submitted in either a .tif, .eps or .ai format with a resolution of 300 dpi or above. Please e-mail to sanji@ccevent.com at time of contract.

## PAYMENT INFORMATION

### TERMS OF PAYMENT

- Payment is due within 15 days of submission of signed contract, if paying by check or wire transfer.
- Payment is due upon submission of signed contract, if paying by credit card.
- Application will not be processed until payment has been received.

Sponsorship Package	\$ _____
Exhibitor Package	\$ _____
Additional Space	\$ _____
Additional Sponsorships	\$ _____
Advertisements	\$ _____
<b>Total</b>	<b>\$ _____</b>

### PREFERRED PAYMENT OPTIONS

Check Please issue check payable to PASS and mail to:  
 PASS General  
 3801 Paysphere Circle  
 Chicago, IL 60674

Wire Transfer Please contact Sandy Cherry, PASS Accounting  
 Manager for wire transfer instructions:  
 Sandy.Cherry@sqlpass.org

Visa     Mastercard     American Express

Cardholder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Exact Billing Address of Cardholder (where monthly statement is mailed):  
 \_\_\_\_\_  
 \_\_\_\_\_

Email Address of Cardholder: \_\_\_\_\_

Signature: \_\_\_\_\_

By submitting this contract we agree to abide by all rules and regulations governing the 2008 PASS Community Summit as described in the Rules & Regulations.

### SUBMIT APPLICATION AND CONTRACT

Please email or fax the PASS Sponsor/Exhibitor participation application to:

PASS c/o Al Shuler

Fax: 614.532.5520

Email: Al.Shuler@sqlpass.org