

EXHIBIT APPLICATION & CONTRACT AGREEMENT – CEC/ICMC 2011 CRYO EXPO
June 13 – 17, 2011 ▪ Spokane, Washington, USA

Please **complete both sides of this form** (type or print) and return to
CEC/ICMC 2011 CRYO EXPO, c/o Centennial Conferences, 917 Front Street, Suite 220, Louisville, Colorado 80027 USA
Tel: (001) 303-499-2299 Fax: (001) 303-499-2599

EXHIBITING COMPANY (For Signage) _____

Contact Person Full Name _____ **Title** _____

Mailing Address _____

City _____ **State/Province** _____ **Zip/Postal Code** _____ **Country** _____

Telephone _____ **Fax** _____

E-mail _____ **Company Website** _____

☐ *Check here, if you do not wish for your contact information to be included in any shared CEC/ICMC 2011 email lists.*

☐ *Check here if you prefer to have your name and contact information removed from any published conference attendee list.*

BOOTH REGISTRATION

☐ **Single Booth, 10' x 10' = \$2,000** ☐ **Double Booth, 10' x 20' = \$3,900**

One complimentary Full Conference registration, two Exhibit Hall Only registrations and one issue of the Transactions for the Cryogenic Engineering Conference for the CEC and the ICMC is included with each 10' x 10' booth space purchased.

COMPLIMENTARY FULL CONFERENCE REGISTRANT (1 per single booth)

Includes admission to all technical sessions, exhibits, social events and the CEC and the ICMC conference transactions. If more than one 10' x 10' booth space is purchased, fee includes two complimentary full conference registrations and two complimentary issues of the Transactions for Cryogenic Engineering Conference for CEC and ICMC.

Full Name _____ **Title** _____

Mailing Address _____

City _____ **State/Province** _____ **Zip/Postal Code** _____ **Country** _____

Telephone _____ **Fax** _____

E-mail _____ **Company Website** _____

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☐ *Check here if you prefer to have your name and contact information removed from any published conference attendee list.*

ADDITIONAL EXHIBIT REPRESENTATIVE(S) (Check applicable box)

*Includes admission to the Exhibit Hall, the Welcome Reception, the Exhibitor Reception, and the refreshment breaks **only**. Full Conference includes admission to all technical sessions, exhibits and social events as well as one copy of either the CEC or the ICMC conference transactions.*

#1 ☐ **Complimentary Exhibit Hall Only** ☐ **Complimentary Full Conference (if double booth)** ☐ **Full Conference (to be invoiced)**

Full Name _____ **Title** _____

Mailing Address _____

City _____ **State/Province** _____ **Zip/Postal Code** _____ **Country** _____

Telephone _____ **Fax** _____

E-mail _____ **Company Website** _____

☐ *Check here, if you do not wish for your contact information to be included in any shared CEC/ICMC 2011 email lists.*

☐ *Check here if you prefer to have your name and contact information removed from any published conference attendee list.*

☛ **If Full Conference (to be invoiced) selected, please choose the type of conference transactions here:** ☐ **CEC** or ☐ **ICMC.**

#2 ☐ **Complimentary Exhibit Hall Only** ☐ **Full Conference (to be invoiced)**

Full Name _____ **Title** _____

Mailing Address _____

City _____ **State/Province** _____ **Zip/Postal Code** _____ **Country** _____

Telephone _____ **Fax** _____

E-mail _____ **Company Website** _____

☐ *Check here, if you do not wish for your contact information to be included in any shared CEC/ICMC 2011 email lists.*

☐ *Check here if you prefer to have your name and contact information removed from any published conference attendee list.*

☛ **If Full Conference (to be invoiced) selected, please choose the type of conference transactions here:** ☐ **CEC** or ☐ **ICMC.**

#3 ☐ Exhibit Hall Only at \$95 ☐ Full Conference (to be invoiced)

Full Name _____ Title _____
Mailing Address _____
City _____ State/Province _____ Zip/Postal Code _____ Country _____
Telephone _____ Fax _____
E-mail _____ Company Website _____

- ☐ Check here, if you do not wish for your contact information to be included in any shared CEC/ICMC 2011 email lists.
☐ Check here if you prefer to have your name and contact information removed from any published conference attendee list.

☛ If Full Conference (to be invoiced) selected, please choose the type of conference transactions here: ☐ CEC or ☐ ICMC.

COMPLIMENTARY CONFERENCE TRANSACTIONS (included in booth fee(s))

One issue of the CEC and the ICMC conference transactions is included in the single booth fee. If more than one 10' x 10' booth space is purchased, fee includes two complimentary full conference registrations and two complimentary issues of the Transactions for Cryogenic Engineering Conference for CEC and ICMC.

- ☛ Ship CEC and ICMC transactions (incl. in single booth fee) to: _____ (provide name here)
☛ Ship 2nd set of transactions (incl. in double booth fee) to: _____ (provide name here)

COMPANY DESCRIPTION

Please submit your company description (100 words or less) to Centennial Conferences by email at cecimc@centennialconferences.com **no later than April 1, 2011**. This description will be included in the on-site Conference Program Book.

PREFERRED BOOTH NUMBERS: _____

POSITIONING ON THE SHOW FLOOR

If you wish to avoid assignment of space adjacent to, or across from, particular companies, please indicate below:

SPECIAL REQUESTS (see prospectus)

Will your company have any special requests at the CEC/ICMC 2011 Cryo Expo, i.e. cooling water/drain, chemical mixtures, liquid hydrogen, etc.?

☐ Yes ☐ No If "Yes", please indicate below:

FEE SUMMARY (see prospectus for benefits and payment requirements)

Booth Fee \$ _____
Additional \$95 "Exhibit-Only" Representatives \$ _____
Full Conference (to be invoiced) ☐ Check here if an invoice is to be sent.
TOTAL \$ _____

EXHIBIT APPLICATION & CONTRACT AGREEMENT

We would like to reserve booth space for the CEC/ICMC 2011 Cryo Expo, June 13 – 17, 2011. We agree to abide by the Terms and Conditions governing exhibits set forth in the Exhibitor Application & Contract Agreement and Rules & Regulations, which is made a part of this contract and to all conditions under which exhibit space at the Spokane Convention Center is leased to the CEC/ICMC 2011.

Authorized Applicants Signature: _____ Date: _____

PAYMENT (Contracts will only be processed if full payment is provided.)

Please make a copy of this form for your records and return the original along with payment to CEC/ICMC 2011, c/o Centennial Conferences, 917 Front Street, Suite 220, Louisville, CO, USA; or fax (if credit card payment) to (001) 303-499-2599.

I wish to pay \$ _____ by: ☐ VISA ☐ MasterCard ☐ Discover ☐ Check (attached to this contract) ☐ Bank Wire

Card Number: _____ Expiration Date: _____

Verification No (3 digit #; back of the card): _____ Postal Code (to where card/bank statements are mailed): _____

I hereby authorize Centennial Conferences on behalf of CEC/ICMC 2011 to charge my account for the amount stated above.

Name (as it appears on the card): _____ Authorized Signature: _____

CANCELLATION POLICY

If written notice of cancellation is received by April 1, 2011, an administrative fee of 20% of the total booth fee will be retained. Cancellations after April 1, 2011 will result in full forfeiture of the exhibit fee.

Thank you for choosing to exhibit at the CEC/ICMC 2011 CRYO EXPO! We look forward to working with you!