

# BICSI VIRTUAL CONFERENCE

## EXHIBITOR & SPONSORSHIP APPLICATION

BOOTH FEE: \$3,500

SPONSORSHIP OPPORTUNITIES LISTED AT [BICSI.ORG/FALLSPONSOR](http://BICSI.ORG/FALLSPONSOR).

2021 FALL CONFERENCE  
22-26 Aug. | Exhibits: 23-25 Aug.

Please review the 2021 BICSI Conference & Exhibition  
*Rules and Regulations and Exhibitor Contract*  
at [bicsi.org/marketing](http://bicsi.org/marketing).

Prices are listed in U.S. dollars and are subject to change.

### CONTACT INFORMATION (please type or print clearly)

Full company name (as you would like it to appear)		Order date
Address	City	State/Province
Zip/Postal code	Country	Website
Company phone number	Company toll-free number	

### PRIMARY BOOTH CONTACT (to receive all exhibitor mailings)

Title	Authorized Signature	
Work number	Mobile number	Email

### SECONDARY CONTACT

Work number	Mobile number	Email	Title
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**CONTACT BICSI Mail or fax this form to:** BICSI, Attn: Courtney Nalls, 8610 Hidden River Parkway, Tampa, Florida 33637-1000 USA  
**Fax:** +1 813.971.0286; **Phone:** 800.242.7405 (USA & Canada toll-free) or +1 813.769.1842; **Email:** [cnalls@bicsi.org](mailto:cnalls@bicsi.org); **Web:** [bicsi.org](http://bicsi.org)

### WE AGREE UNCONDITIONALLY TO THE FOLLOWING TERMS:

We understand, agree to and will abide by the terms and conditions outlined in the 2021 BICSI Conference & Exhibition Rules and Regulations AND the Exhibitor Contract found at [bicsi.org/marketing](http://bicsi.org/marketing).

Authorized signature	Title	Date
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### BICSI CARES CONTRIBUTION

Would you like to make a tax deductible corporate donation to the BICSI Cares charity being supported at the conference(s)? If so, please check for which conference(s) and include your donation amount. Charity details will be posted to the conference website once a charity has been selected.

Full Donation \$ \_\_\_\_\_  Please contact me with more information.

Authorized signature \_\_\_\_\_ Date \_\_\_\_\_

### PAYMENT SECTION **Please submit this form for processing.**

Please make all checks payable to BICSI in U.S. dollars, drawn from a U.S. bank. (Call BICSI's Accounting Department for instructions on wiring funds.) For your protection, BICSI does not accept emailed credit card numbers. If paying by credit card, please mail or fax your payment information instead.

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Sponsorship Item _____	Cardholder name (as it appears on the credit card)	Cardholder signature		
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