

Sponsorship and Exhibitor Order Form

Move In: May 30, 2012 9:00 – 17:00

Exhibits: May 30 - June 1, 2012 9:00 – 17:00

Move Out: June 1, 2012 by 15:00

INFORMATION:

Company:	Contact Name:	Title:
Address:		City:
State:	Postal Code:	Country:
Phone:	Fax:	Email:
Authorized Signature:	Date:	

SELECTION:

Please note that the assignment of Exhibit Space is coordinated by InnovationFAB and coolingZONE, LLC. As an Exhibitor, you have the opportunity to give a 20 minute Technical Presentation regarding new products/services your company has to offer for thermal management of electronics. Presentations are limited to 6 and are filled on a first come basis – *act now to reserve your space!* The presentation must be technical in nature and not a sales presentation. Please select your sponsorship and/or exhibitor package from the options below:

- | | | | | | |
|--------------------------|--------------------------|-------|-------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> | Showcase Package Premium | €3500 | Technical Presentation: | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> | Showcase Package Gold | €1950 | Technical Presentation: | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> | Showcase Package Silver | €1250 | Technical Presentation: | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> | Corporate Sponsorship | €350 | | | |
| <input type="checkbox"/> | Luncheon Sponsorship | €750 | | | |
| <input type="checkbox"/> | Reception Sponsorship | €1125 | | | |

PAYMENT INFORMATION:

Please make payment by Credit Card (**MasterCard/Visa/American Express**)

Credit Card #: _____
 Expiration Date: _____
 Billing Address: _____

Cardholder's Name: _____
 Cardholder's Signature: _____
 Billing Phone: _____

Please email completed form to registration@coolingZONE.com