



**WESTERN BUSINESS EDUCATION ASSOCIATION
CALIFORNIA BUSINESS EDUCATION ASSOCIATION**

2012 Regional Conference

February 16-20, 2012

Fairmont Hotel, Newport Beach, CA

Exhibitor Registration Form

Making Waves—Creating Opportunities

| | | |
|--|-----|--------|
| Name of Firm/Organization | | |
| Mailing Address | | |
| City, State, ZIP | | |
| Contact Person | | |
| Telephone | Fax | E-mail |
| Please check <input checked="" type="checkbox"/> the way you wish to be contacted. Phone <input type="checkbox"/> Fax <input type="checkbox"/> E-mail <input type="checkbox"/> Other: | | |
| Description for Conference Program: | | |

Please check which group(s) of purchasing decision makers most interest you.
High School Community College Private College ROP/C All Other _____

SUPPORT REQUIREMENTS

Standard exhibit registration fee includes one 6-foot draped exhibit table and two chairs, one **Saturday Exhibitors' Luncheon** ticket, a company contact listing in the conference program and a \$50 hotel table set-up fee for the regular registration fee of \$350. Electrical outlet connection is \$30. Additional tables are \$125 each. **Additional electrical outlets and other AV requests are at the exhibitor's expense arranged through hotel AV services. Deadline for additions or changes, January 15, 2012. ALL EXHIBIT SPACE MUST BE PREPAID.**

Number of table(s) required _____ Electrical outlet required Yes No
Additional furniture requirements, if any (at cost) _____
Special accommodations required (at cost) _____

We would appreciate any recommendations that you may have to assist us in serving you better.

RESPONSIBILITY

California Business Education Association (CBEA) and the sponsoring hotel shall not be responsible for any loss, damage, or injury that may occur to the exhibitors, or to the exhibitors' employees or property from any cause whatsoever prior, during, or subsequent to the period covered by this agreement. Exhibitor on signing the agreement expressly releases, the California Business Education Association, and the sponsoring hotel from and agree to indemnify same against any claim(s) for such loss, or injury.

SUBLETTING AND CANCELLATION

Booth space(s) may not be sublet or shared without written authorization from the Exhibit Chairperson.
No refunds will be made in the event of cancellation.

Vendor Signature

Date

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EXHIBIT SPACE REGISTRATION Includes 1-6' draped exhibit table and 2 chairs, name badge, program, program listing, and 2-day access to conference breakout sessions and keynote speakers. Meals at published conference rates.

| Registration | Amount | Amount Paid |
|--|--------------|-------------|
| Special Early Bird Rate - Pre-conference registration by May 1st, 2011 | \$250 | |
| Regular registration (Postmarked by January 15, 2012) | 350 | |
| Late registration (Postmarked after January 15, 2012) | 450 | |
| Additional tables @ \$125 per table | 125 | |
| Electrical outlet | 30 | |
| Additional Exhibitor Luncheon ticket (one per booth is included with registration) | 45 | |
| REGISTRATION TOTAL | | \$ |

SPONSORSHIP

- | | |
|---|--|
| <input type="checkbox"/> Half page ad in conference program \$300 | <input type="checkbox"/> Friday, DJ & Dancing Networking Reception . . . 500 |
| <input type="checkbox"/> Full page ad in conference program 500 | <input type="checkbox"/> Saturday, Morning Exhibit Area Refreshments . . 500 |
| <input type="checkbox"/> Program printing costs (<i>includes full page ad on back of program</i>) 2,000 | <input type="checkbox"/> Saturday Luncheon 500 |
| <input type="checkbox"/> Sponsor Keynote Speaker* 1,000 | <input type="checkbox"/> Sunday, Coffee Hour 500 |
| <input type="checkbox"/> Computer Workshops* 1,000 | <input type="checkbox"/> Sunday, Awards Banquet 500 |
| <input type="checkbox"/> Friday, Opening General Session 500 | <input type="checkbox"/> Webinars (per session—5-7 sessions) 500 |
- * *Includes half page ad in conference program*

PAYMENT—This is a valid Perkins III (CTEA) expenditure.

WBEA Tax ID #93-081 6856 CBEA Tax ID #94-6102120

Check enclosed made payable to CBEA in the amount of \$ _____

Credit Card American Express Discover MasterCard Visa

Card Number _____ Expiration Date _____

Signature _____ (*required for all charges*) _____ Billing ZIP Code _____

NO PURCHASE ORDERS ACCEPTED

Register online at www.wbea.info or www.cbeaonline.org

Questions: Bob Livingston blivingston@cerritos.edu
 Terri Savarese membership@cbeaonline.org

Mail form to: **Conference Registration Office**
 WBEA/CBEA Regional Conference
 PO Box 2591
 Walnut Creek, CA 94595

CANCELLATION POLICY: \$50 processing fee after December 15, 2011. NO refunds after January 15, 2012.