**2020 USITCC & ISECON**

#### SPONSOR & EXHIBITOR SIGN-UP

**Sponsor/Exhibitor/Recruiter Agreement**

**ORGANIZATION INFORMATION**

Company Name:

Contact Person: email:

Address:

City/State/Zip:

Business Phone: Fax:

**Sponsorship Opportunity Requested: Optional: Specific Contest(s) wanting to Sponsor:**

**AUDIENCE PREFERENCE: \_\_\_\_ IT Faculty ONLY \_\_\_\_ IT Students & Faculty (everyone)**

**EXHIBITOR ONLY Option: \_\_\_\_ $750 by 2/1/2020 otherwise $850 through 3/26/2020**

 **\_\_\_\_ +$70 (OPTIONAL) additional for booth electricity (facility charges)**

**MEAL PLAN**: Sponsors receive 4 event staff daytime meal plans plus 2-5 awards banquet tickets based on sponsor level

While all Exhibitors are entitled to two event staff daytime meal plans only (no banquet tickets)

\_\_\_ Additional sponsor/exhibitor discounted meal plans at $175 for both “days” and +$95 for the banquet (all per person)

Exhibit Staff: Badge #1: Badge #2:

 Badge #3: Badge #4:

**PAYMENT INFORMATION (CHECK ONE):** TOTAL AMOUNT being remitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_ Check is enclosed \_\_\_\_\_ Send an Invoice for Payment Processing \_\_\_\_\_ Credit Card (AmExp/MasterCard/Visa)

Credit Card Number: \_\_\_\_ CVV/CVC#: \_\_\_\_\_\_\_\_ Expiration: \_\_\_\_\_\_\_\_

Name on Card: Signature:

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

Billing Phone Number associated with the card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The undersigned agrees to abide by the exhibition rules and regulations as set forth in this document.**

Signature: \_\_\_ Date:

**RETURN/FAX THE COMPLETED FORM WITH PAYMENT TO:**

**Foundation for IT Education – USITCC/ISECON** FAX: 210-496-3482 or

500 N. Michigan Avenue, Suite 600 Email Scanned image to: kjetton@satx.rr.com

Chicago, IL 60611

**For additional information – refer to** [www.usitcc.com](http://www.usitcc.com) **and/or contact:**

Kevin Jetton, FITE VP & Meeting Planner at kjetton@satx.rr.com or 210-275-2062