



Company Name (as you would like it to appear in conference program)

Contact Name Title

Address

City State Zip

Phone Email Company Website

Please provide a brief description of your company's services, contact information, and a company logo in electronic format for the attendee exhibitor listing. Materials should be submitted no later than August 31, 2009 to info@swponl.org.

Booth locations will be coordinated by the meeting manager. Priority in assigning booths according to company preference is given according to sponsorship level and date that a signed contract WITH payment is received in the SWPONL Office (first-come, first-served). Companies are not permitted to share booths. Some sponsorship items are limited to one sponsor and include a "first right of refusal." Please feel free to contact the SWPONL Office at (412) 731-3420 to check the availability of a specific limited sponsorship.

Please register the above mentioned company for a:

- Basic Exhibit Space—Early Bird—\$500 Basic Exhibit Space—August 1-28—\$600 Basic Exhibit Space—Aug 29-Sept 4—\$750
Extra Representative—\$35 Additional Thursday Lunch — \$25 Electrical Hookup \$50

Sponsorships:

- Thursday Continental Breakfast—\$300 Friday Continental Breakfast—\$300
Thursday Afternoon Dessert with Exhibitors—\$300 Friday Morning Break—\$300
Meeting Pens —\$300 Meeting Folders —\$300 Meeting CDs— \$300 Meeting Totes — \$500
Speaker—\$500 Poster Area—\$500
Thursday Attendee Luncheon —\$1000 Thursday Networking Event —\$1000

Total Amount Enclosed \$

Booth Preferences: First: Second: Third:

We understand and agree to hold harmless SWPONL, their officers, directors, contractors and agents from any and all claims, demands or liabilities of any kind that we may have against them by reason of any cause arising out of or in any way related to the conference. We assume entire responsibility and hereby agree to protect, indemnify, defend and save SWPONL, Nemacolin Woodlands Resort and their employees and agents harmless against all claims, losses and damages to persons or property, governmental charges or fines and attorney fees arising out of or caused by Exhibitor's installation, removal, maintenance, occupancy or use of the exhibition premises or a part thereof, excluding any such liability caused by the sole negligence of the hotel, its employees and its agents. In addition, we acknowledge that SWPONL and Nemacolin Woodlands Resort do not maintain insurance covering Exhibitor's property and that it is the sole responsibility of the Exhibitor to obtain business interruption and property damage insurance covering such losses by the Exhibitor.

Exhibitor Company Name

Company Representative Name (Please Print)

Company Representative Signature Date

Check Make Payable and mail to: SWPONL — 1844 Ardmore Blvd. — Pittsburgh, PA 15221

I authorize SWPONL to charge this card in the amount of \$ toward the SWPONL exhibit fees/sponsorship

Visa/Master Card - - - Expiration Date / / CID

Name on Card Signature Date / /