

# SPONSORSHIP/ AD INSERTION

## BICSI BEYOND 2026

30 Aug.-2 Sept. | Exhibits: 31 Aug.-2 Sept.

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



Please review the BICSI Beyond 2026 Rules and Regulations and Exhibitor Contract at [bicsi.org/marketing](https://bicsi.org/marketing).

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

Exhibitor/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	
Description of products/services your company will be exhibiting				

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

Name/Title		Authorized Signature
Work number	Mobile number	Email

### SECONDARY CONTACT

Name/Title		
Work number	Mobile number	Email

If requesting a bigger booth size than what you receive with your sponsorship level, please use the appropriate pricing found on the exhibitor applications for each additional 10'x10' when entering below.

SPONSORSHIP LEVEL	
■ Diamond ■ Platinum ■ Silver ■ Bronze	
Sponsorship level cost:	\$ _____
<b>ADDITIONAL 10X10s</b>	
Quantity:	_____
+ \$/10X10 \$	_____
Layout: (e.g., 20x30)	_____
<b>Total:</b>	\$ _____
<b>OTHER SPONSORSHIPS</b>	
Item one: _____	+ Item one cost: \$ _____
Item two: _____	+ Item one cost: \$ _____
Item three: _____	+ Item one cost: \$ _____
<b>PROGRAM AD(S)</b>	
Ad size: _____	+ Ad cost: \$ _____
<b>= TOTAL</b>	\$ _____

**WE AGREE UNCONDITIONALLY THAT THIS SPONSORSHIP CONTRACT CANNOT BE CANCELLED AT ANY TIME. WE ALSO AGREE UNCONDITIONALLY TO THE FOLLOWING TERMS:**

**1.** 50% non-refundable deposit is required by November 7, 2025. Remaining balances are due by May 1, 2026. **2.** Booth assignments will be made in the order in which we receive the contacts in each category (see page 3) and paid the 50% deposit by May 1, 2026. After that deadline, assignments will be made on a first-come, first serve basis. **3.** We understand, agree to, and will abide by the terms and conditions outlined in the *BICSI Beyond 2026 Rules and Regulations* AND the *Exhibitor Contract* found at [bicsi.org/marketing](http://bicsi.org/marketing). **4.** The relationship between BICSI and the sponsoring organizations/corporations of an event or an event-related item does not represent exclusive agreements between BICSI and the specific organizations/corporations, nor does it suggest that BICSI endorses the programs, products, or services of the organizations/corporations. Sponsor agrees that this sponsorship contract cannot be cancelled at any time. **Important Note:** Should any of the sponsorship opportunities be partially funded, the sponsoring organization/corporation will receive the benefits outlined, but with the caveat "sponsored in part by name of company." **Right to Refuse Sponsor:** BICSI shall reserve the right to reject a potential sponsor on such factors as questionable business practices, those having a mission conflict with BICSI, or those who desire to assume control of an event through sponsorship. **Material Production:** BICSI will be responsible for the production of materials (unless otherwise specified) and will invoice the sponsoring organization/corporation directly. If the sponsoring organization/corporation is able to obtain a better product, then BICSI reserves the right to approve the product and subsequent design of the product. BICSI reserves the right to charge a sponsorship fee should the sponsoring organization/corporation decide to produce the materials. Quantities may change depending on attendance figures.

Exhibiting companies agree to maintain such insurance that will fully protect BICSI from any and all claims of any nature whatsoever, including claims under the Worker's Compensation Act, and for personal injury, including death which may arise in connection with the installation, operation, or dismantling of the exhibitor's display. Exhibiting companies are required to add on to their existing insurance portal-to-portal rider at a nominal cost, protecting them against the loss damage to their materials by fire, theft, accident, or other related loss.

**LOGO SUBMISSION:** Logos must be received upon confirmation of sponsorship. Please email [kosterman@bicsi.org](mailto:kosterman@bicsi.org). Logos must be provided as a vector file (Illustrator or EPS) in CMYK **AND** black **OR** white version. In addition, an RGB PNG must be provided for our website.

I, the undersigned, as authorized agent of the above-named company, agree to adhere to the specified terms and conditions of this contract/application and to the full *BICSI Beyond 2026 Rules and Regulations* and *Exhibitor Contract* located at [bicsi.org/marketing](http://bicsi.org/marketing). I understand I am responsible for ensuring that all other company representatives do the same. I acknowledge that BICSI reserves the right to accept or reject this application.

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

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**FOR BICSI USE ONLY**

**IMPORTANT:** The current show **MUST** be paid in full **PLUS** the minimum deposit required for any future show(s) **MUST** be paid in full to select booth space in that show's lottery.

	Winter
Company ID:	
Booth Number:	
Booth Size:	
Total Booth Cost:	
Deposit Received:	
Deposit Processed:	
Balance Due:	
Balance Received:	
Balance Processed:	
Invoice Number:	

**CONTACT BICSI**

**Mail or fax this form to:** BICSI, Attn: Courtney Best Nalls, 8610 Hidden River Pkwy., 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)

**PAYMENT SECTION**

Please submit front and back of 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.

Total \$ \_\_\_\_\_

- Check or Money Order    Visa    MasterCard    American Express    Discover

\_\_\_\_\_  
Cardholder name (as it appears on the credit card)

\_\_\_\_\_  
Cardholder signature

\_\_\_\_\_  
Credit card number

\_\_\_\_\_  
Expiration date

\_\_\_\_\_  
CVV

\_\_\_\_\_  
Billing zip code (required)