

8th California Unified Program Annual Conference

February 6 - 9, 2006

EXHIBITOR ORDER FORM for February 8 & 9, 2006

The Hyatt, San Francisco Airport 650-347-1234 (under CUPA block)

Price includes continental breakfast Wednesday & Thursday, Sponsorship of
Hors d'oeuvres at Wednesday 2/8/06 Reception and no-host bar with smooth jazz.

For further conference details go to our website at www.calcupa.net

Please return order form by January 6, 2006

Exhibitor Booth			
Item	Charge per item	Quantity	Total
Exhibitor Table Tops (6' x 8') with 1 - 6' Table - 2/8 & 9	Includes skirted table, backdrapes & sign \$ 875.00		
Exhibitor Booths (8' x 10') with 1 - 6' Tables - 2/8 & 9 with 2 - 6' Tables - 2/8 & 9	Includes skirted table, backdrapes & sign \$ 975.00 \$ 1,000.00 (fits only at certain booth #'s)		
Additional person (over 2 people)	\$ 125.00 per day (includes meals)		
Chair (s)	2 chairs are included & wastebasket		
Telephone/Internet line	Call in request for quotes		
Power/Electrical 7 strip 5-15 amps	\$ 80.00 (\$105 after 1/6/06)		
Power/Electrical - over 30 amps	\$ 215.00 (\$305 after 1/6/06)		
Other Sponsorship options	Includes signage and slide show		
Bronze Sponsor for breaks	\$ 500.00		
Silver Sponsor for breaks	\$1,000.00		
Gold Sponsor for breaks	\$1,500.00		
Padfolios	Give us a call		
Super Bowl Sunday Pre-registration party	Bronze, Silver or Gold Sponsor for Hors d'oeuvres		
Liability Insurance required *			
Specify Booth # choice (#1 _____)(#2 _____)(#3 _____)		Total: \$ _____	

Order received _____. Booths are assigned by receipt of order and payment.
There is a \$75 cancellation fee if received by January 15, 2006. No refunds after 1/16/2006.

Contact

Name _____ Names

of Participants for name badges _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Fax () _____

E-mail _____

ALL ORDERS MUST BE PREPAID

Method of payment: Please find enclosed my check in the amount of \$ _____

Credit Card (**Please attach a copy of front and back of card): or register on website**

Card # _____ VISA MC AMEX

Card holder _____ Exp. Date _____

Authorized Signature: _____ Date _____

Please return with payment no later than January 6, 2006 – Space is limited !!!!!

California CUPA Forum, Attn: Sheryl Baldwin, P.O. Box 2017, Cameron Park, CA
95682-2017 * 530-676-0815 * 530-676-0515 Fax * email: sheryl@ccdeh.com *

*The exhibitor assumes the entire responsibility and liability for losses, damages, and claims arising out of exhibitor's activities on the hotel premises and will indemnify, defend, and hold harmless the Hotel, its owner, and its management company, as well as their respective agents, servants, employees and California CUPA Forum from any and all such losses, damages and claims.

CALIFORNIA CUPA FORUM

Attn: Sheryl Baldwin
P.O. Box 2017
Cameron Park, CA 95682-2017
conference day
530-676-0815 TEL
530-676-0515 FAX
sheryl@ccdeh.com
www.calcupa.net

Exhibitor fee includes:

- **2 Conference Registrations**
- **Continental Breakfast Wed/Thurs.**
 - **2 Lunch tickets each**
- **Recognition at vendor reception**
- **6' Draped Table with name sign**
- **One page advertisement or logo you provide on Powerpoint to be displayed at luncheons.**
- * **Each participant will receive vendor list.**

