

EXHIBITOR REGISTRATION FORM

The Nineteenth Pennsylvania Drilling and Blasting Conference **November 14 and 15, 2019**

We hereby contract for an exhibit booth at the ***Nineteenth Pennsylvania Drilling and Blasting Conference*** to be held at the **The Penn Stater Hotel and Conference Center**, State College, Pennsylvania.

We understand that space will be assigned on a first-come, first-served basis. Exhibit space cannot be reserved without payment in full.

The exhibit booth fee of \$450 includes one (1) exhibitor, one 110-volt outlet, a draped booth, one skirted table, two chairs, trash receptacle, signage, and conference materials. Free wireless Internet is available on-site via connecting to the AT&T wifi access and opening a web browser. Additional requirements, such as extra furniture, electrical, audiovisual, etc., will be at an extra charge via Hospitality Services (phone 814-863-5047 by **Friday, November 8**). Also included are two continental breakfasts, one buffet lunch, one reception, and refreshment breaks.

The fee for each **additional exhibitor** at a booth is **\$175** and includes all meals previously specified and conference materials. *Each exhibitor must wear a conference name badge throughout the conference.*

The fee for having an **outdoor display** of machinery/products is **\$250**. Email John Farris at jlf30@psu.edu by **Friday, November 8**, with your arrival/departure details of the outdoor display.

Note: Any exhibitor who desires to receive a certificate for Continuing Education Units (up to 10 hours) upon completion of the conference must register as a regular conference participant (see fee and registration web page at blasting.outreach.psu.edu) instead of registering as an exhibitor representative.

Shipment/drayage must be via the exhibit services company indicated on the conference website at blasting.outreach.psu.edu/sponsor-exhibitor. (Do not ship directly to conference venue as penalty fees apply).

After checking booth availability at eme.psu.edu/news-events/conferences/blasting, please list your first three (3) booth choices:

Exhibit Booth Number: Indicate your first, second, and third choice (includes one registration):

_____ # _____ # _____ @ \$450

Additional Exhibitors at Booth # _____ @ \$175 each = _____

Outdoor Display of Machinery/Products # _____ @ \$250 each = _____

Additional Booth: Indicate your first, second, and third choice (includes one registration):

_____ # _____ # _____ @ \$450

Additional Exhibitors at Additional Booth # _____ @ \$175 each = _____

Total Fees **Total** _____

PAYMENT IN FULL MUST ACCOMPANY THIS CONTRACT.

Contact Information

Company contact person: _____ **Email:** _____

Penn State will use this email address to communicate with me about all programs for which I register. This email address will also be used to communicate logistical information regarding the program.

Booth sign (COMPANY NAME) should read: _____

Primary exhibitor's name: _____

Special dietary needs/accommodations (if none, leave blank) _____

Company name: _____

Business address: _____

City, State, ZIP code: _____

Business or home phone no.: _____ Fax: _____

Primary Exhibitor's PSU ID no. _____ (if you do not have a PSU ID, you may supply your SSN*)

****Providing your Social Security Number is optional.** The Social Security number (SSN) you provide for enrollment purposes, or when requesting specific services, will be used by the University to verify your identity for official record keeping and reporting. If you choose not to supply your SSN, certain services — such as transcripts, enrollment verification, tax reporting, and financial aid — may not be available to you, and Penn State cannot guarantee a complete academic record for you. Your SSN will be stored in a central system and used only as a primary source to identify you within the Penn State system; the Penn State ID will be used as the primary identifier.*

Additional exhibitors attending:

#1 Name: _____ Email: _____

Penn State will use this email address to communicate with me about all programs for which I register. This email address will also be used to communicate logistical information regarding the program.

Penn State ID no. (if you do not have a PSU ID, you may supply your SSN*) _____

Special dietary needs/accommodations (if none, leave blank) _____

Company name: _____

Business address: _____

City, State, ZIP code: _____

Business or home phone no.: _____ Fax: _____

#2 Name: _____ Email: _____

Penn State will use this email address to communicate with me about all programs for which I register. This email address will also be used to communicate logistical information regarding the program.

Penn State ID no. (if you do not have a PSU ID, you may supply your SSN*) _____

Special dietary needs/accommodations (if none, leave blank) _____

Company name: _____

Business address: _____

City, State, ZIP code: _____

Business or home phone no.: _____ Fax: _____

#3 Name: _____ Email: _____

Penn State will use this email address to communicate with me about all programs for which I register. This email address will also be used to communicate logistical information regarding the program.

Penn State ID no. (if you do not have a PSU ID, you may supply your SSN*) _____

Special dietary needs/accommodations (if none, leave blank) _____

Company name: _____

Business address: _____

City, State, ZIP code: _____

Business or home phone no.: _____ Fax: _____

The Pennsylvania State University Conferences and Institutes Exhibitor Agreement

Name of Conference: PA Drilling and Blasting Conference 2019

Location of Conference: The Penn Stater Hotel and Conference Center, State College, PA

Name on Booth: _____

Exhibitor hereby agrees to the following:

1. Exhibitor on behalf of itself, its members, agents and employees hereby releases University, its trustees, officers, agents and employees, from all liabilities and claims for damages and/or suits for or by reason of any injury or injuries to any person or persons or property of any kind whatsoever, whether the person or property of Exhibitor, its members, agents or employees, or third persons, from any cause or causes whatsoever while Exhibitor is in or upon University premises or any part thereof during the term of this Agreement, or occasioned by any occupancy or use of premises or any activity carried on by the Exhibitor in connection therewith.
2. Exhibitor hereby agrees to indemnify, defend and hold harmless The Pennsylvania State University, its trustees, officers, agents and employees, from and against any and all liability, claims, charges, expenses (including counsel fees) and costs on account of or by reason of any injuries, liability, claims, suits, or losses however occurring or damages growing out of the same, arising out of Exhibitor's Exhibit on University premises, and/or property rented by the University, whether or not caused in part by a party indemnified hereunder.
3. The Exhibitor agrees to maintain commercial general liability (\$1 million) and property damage insurance in amounts that are approved by the University during the time the Exhibitor participates in the exhibit and to name the University as an additional insured under such policies of insurance. Exhibitor shall furnish the University a certificate of insurance evidencing such coverage.
4. Exhibitor agrees that all personal property shall be removed from the premises by **5:00 p.m., November 15, 2019.**

Agreed to by:

Authorized Signature of Exhibitor _____

Date _____

Name and Title (Please Print) _____

Company Name _____

Address _____

Payment Method

Your payment, in full, must accompany your registration form. The Pennsylvania State University's federal ID number is 24-6000376.

Enclosed is a check or money order for the total amount indicated, signed and payable to The Pennsylvania State University.

Enclosed is a purchase order (made payable to The Pennsylvania State University) or letter of authorization from my employer or sponsoring organization.

Credit card: May be mailed or faxed.

American Express

MasterCard

Visa

Discover

Cardholder's name (please print): _____

Cardholder's signature: _____

Cardholder's phone number _____

Credit card billing address (no. and street, or box no.): _____

City: _____ State: _____

ZIP code: _____ Country: _____

Credit card number: _____ Exp. date (month/year): _____

(Credit card charges cannot be processed without signature and expiration date.)

Send All Registration Pages to:

Conferences and Institutes Registration

The Pennsylvania State University

Box 410

State College PA 16804-0410

Phone: 814-867-4973

Fax: 814-863-2765

Booth space will be assigned on a first-come, first-served basis upon completion and receipt of:

1. Exhibitor Registration Form
2. Exhibitor Agreement
3. Payment