

➤ 2008 Exhibit Space & Sponsorship Application

www.CCSAmiami.com

Credit & Collection Symposium of the Americas
October, 28-30, 2008 - Hyatt Regency Hotel

Application Checklist

- Company Contact Information
- FULL Payment (including signature & expiration date if paying by credit card)
- Completed Exhibitor Listing Request Form
- Booth Choices

Applicant: Company Name _____

Street Address _____

City/State/Province/Zip _____

Telephone Fax _____

Contact (Trade Show Coordinator/person to receive all exhibit booth materials) _____

E-Mail of contact person (optional) _____

Registrant Information

Complimentary Registrant Name _____ Badge Name _____

Additional Registrant Name _____ Badge Name _____

Additional Registrant Name _____ Badge Name _____

RETURN TO: CMS | Credit Management Solutions
Veronica Llerenas
Fax: +1(404) 935 5316
Phone: +1(404) 644 3283
E-Mail: veronica.llerenas@cmspeople.com
P.O. Box: CCSA Conference, C/O Remit Corporation, PO Box 7, Bloomsburg, PA 17815



Sponsorship

Sponsors are required to pay 50% of commitment upon contract signature (credit card hold is acceptable if Sponsor prefers to pay by company check). The other 50% must be paid at least 10 days previous to the event.

Sponsorship item(s) applied for: _____

Level (Silver / Gold / Platinum) _____ Amount _____

Item _____ Amount _____

Item _____ Amount _____

Total Due Upon Acceptance of Sponsorship US\$ _____

Booth Location

(Exhibit space is assigned on a first come, first served basis.)

1st choice _____ 2nd choice _____ 3rd choice _____

Costs/Payment Information

Sponsorship Level
Booth 10 X 10 US\$ _____
Silver 10 X 10 US\$ _____
Gold 20 X 10 US\$ _____
Platinum 24 X 8 US\$ _____
Sponsorship Item US\$ _____
Additional Registrants US\$ _____

GRAND TOTAL including sponsorships US\$ _____

Visa MasterCard American Express Check

Make checks payable to Credit Management Solutions and mail to
PO Box 7, Bloomsburg, PA 17815

Card # _____ Exp. Date _____

Name as it appears on card _____

Signature _____

Faxes will only be accepted as a form of application for credit card payments. See the Exhibit & Sponsorship Rules and Regulations for the refund, exchange and cancellation policies.

CMS USE ONLY: Date Received _____ Exhibit / Sponsorship Accepted by _____ Level _____ Booth Assigned _____

Complete all four sections of this form and send it along with your application for exhibit space.
Your application will not be processed without this form.

CMS will list each exhibiting company alphabetically and, if you request it, by product/service category in the CCSA | Miami 2008 program book. Listings are complimentary and are for contracted exhibitors only. Your company will be listed in the program book as it appears below:

1. Company Contact Information

Company Name (as you would like it to appear in the program book, on your booth and on name badges)

Street Address

City/State/Province/Zip

Telephone

Fax

Website

Contact Name

Telephone of contact person

E-mail

2. Product or service description

Please submit a Fifty-word (50) company description with your application.

3. Corporate logo

Please submit a copy of your corporate logo in EPS format (at least 300dpi) with application.

4. Product/Service Categories

If you feel that your company does not fit under any of the categories, feel free to write in suggestions. We cannot guarantee that we will add the category, but will consider it.

- Bad Debt Portfolios
- Billing Software
- Check Servicing
- Collection Agency
- Collection Attorneys
- Collection Software
- Telecommunications Solutions
- Consulting/Training
- Data & Document Management
- Dialer Software
- Forms Providers & Printing/Mailing Services
- Fund Transfer Services
- International Services
- Mergers & Acquisitions
- Payment Solutions
- Scoring
- Skiptracing Services
- Other _____

Please fax Application and Exhibitor listing request form to Veronica Llerenas at +1 (404) 935 5316.
For questions please call Veronica at +1 (404) 644 3283 or veronica.llerenas@cmspeople.com

