



82nd Annual Federal Tax Forum

April 18-19, 2016 | Westin Houston Memorial | Houston, TX | <http://www.api.org/Events-and-Training/Calendar-of-Events/2016/fedtax>

Return by March 4, 2016 | Fax your agreement to 202-682-8222 | Artwork due March 18

We plan to attend the API event indicated below, and would like to participate as a sponsor. We agree to abide by the following conditions and procedures and will brief our representatives accordingly:

82nd Annual Federal Tax Forum
April 18-19, 2016
Westin Houston Memorial City
945 Gessner
Houston, Texas, USA

1. **Printed Program Notation:** An acknowledgment of the level of support, item, or event sponsored will be made in the final printed program. The exact wording will be at the discretion of API.
2. **Registration Signage:** API will create a prominent sign or other form of recognition that features the company name of the sponsor. The exact wording and type of recognition will be at the discretion of API.
3. **Display Items:** One 8' display table will be made available to each sponsoring and exhibiting company April 18-19, 2016.
4. **Liability and Security:** Each sponsor must make provisions for the safeguarding of his/her goods, materials, equipment and display at all times. Neither API, nor the Albuquerque Marriott, or their officers, representatives or employees will be responsible for any destruction, damage, theft or loss to the exhibitor's property.
5. **Indemnification:** The sponsor assumes entire responsibility and hereby agrees to protect, indemnify, defend, save and hold harmless API, the Westin Houston Memorial City Hotel, and its employees and agents against all claims, losses and damages to persons or property, governmental charges or fines, and reasonable attorney's fees arising out of or caused by sponsor's installation, removal, maintenance, occupancy or use of the display premises or part thereof, excluding any such liability caused by the sole negligence of API.
6. **Insurance:** The sponsor acknowledges that API and the Westin Houston Memorial City Hotel do not maintain insurance covering sponsor's property and that it is the sole responsibility of sponsor to obtain business interruption and property damage insurance covering such losses by sponsor.
7. **Event Cancellation:** If unusual circumstances prevail and API must cancel the event, a full refund of the sponsor fee will be made within thirty (30) days of the cancellation. Sponsor waives all claims that may be made against API, its employees, agents and assigns, except the right to a refund of the sponsor fee.
8. **Sponsor Cancellation:** Sponsors may cancel their obligation up to March 4, 2016; however, 50% of the sponsor fee is non-refundable. Notice of cancellation must be submitted in writing. Send to: American Petroleum Institute, 1220 L Street, NW, Washington, DC 20005-4070 (E-mail: parkinsa@api.org) or fax: 202-682-8222.
9. **Assignment:** Neither API nor the sponsor may assign their rights under this Agreement without the express written consent of the other party.
10. **Sales:** No business transactions/solicitations are allowed at the "Sponsors Only Table" or during any API functions.
11. **Package Handling Fees:** Sponsors understand that the hotel may charge a fee for package handling. Sponsors agree to be responsible for paying these fees upon arrival at the hotel and take receipt of their shipment of materials.
12. **Shipping Information:** Any materials shipped by sponsors should be addressed as follows:

Company Representative **[Name]**
Hold for Arrival **[Date]**
Westin Houston Memorial City
945 Gessner
Houston, TX 79056

Company/Organization

Representative's Name (Please print)

Representative's Signature

Date Signed

As noted on the Sponsor Application, each sponsor may register 3 complimentary attendees. Attendee names are due at the time of submission of the application. Any attendees beyond 3 must pay the regular registration fee.



AMERICAN
PETROLEUM
INSTITUTE

Sponsor Application

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Additional Attendee #2

Name _____

Company (if same as on sponsor application, write "same") _____

Street Address _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

Phone _____

Fax _____

E-mail _____

Materials Preference: *Please check one:* _____ Book _____ CD

Emergency Contact: _____

Additional Attendee #3

Name _____

Company (if same as on sponsor application, write "same") _____

Street Address _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

Phone _____

Fax _____

E-mail _____

Materials Preference: *Please check one:* _____ Book _____ CD

Emergency Contact: _____