



AMERICAN
PETROLEUM
INSTITUTE

Sponsor Application

83rd Annual Federal Tax Forum

April 24 - 25, 2017 | Westin Houston Memorial | Houston, TX | <http://www.api.org/products-and-services/events/calendar/2017/fedtax>

Return by March 10, 2017 | Fax your agreement to 202-682-8222 | Artwork due March 13

Company Information

Company

Street Address

City

State/Province

Zip/Postal Code

Country

Phone

Fax

Website:

Contact for company logo: PHONE:

Contact for company logo: EMAIL:

Name of Complimentary Registrant (#1):

Phone:

E-mail:

Emergency Contact:

Materials Preference: Please check one: ____ Book ____ CD

Sponsor/Exhibitor Opportunities: (Please check Federal Tax Forum website for availability prior to making your selection)

<input type="checkbox"/> Continental Breakfast – April 24th <i>Includes Exhibit Table</i>	\$6,000
<input type="checkbox"/> Luncheon – April 24th <i>Includes Exhibit Table</i>	\$10,000
<input type="checkbox"/> Networking Reception – April 24th <i>Includes Exhibit Table</i>	\$10,000
<input type="checkbox"/> Continental Breakfast – April 25th <i>Includes Exhibit Table</i>	\$6,000
<input type="checkbox"/> Luncheon – April 25th <i>Includes Exhibit Table</i>	\$10,000
<input type="checkbox"/> Conference Program (with full page ad) <i>Includes Exhibit Table</i>	\$8,000
<input type="checkbox"/> Conference Lanyard <i>Includes Exhibit Table</i>	\$6,000
<input type="checkbox"/> Conference Wifi <i>Includes Exhibit Table</i>	\$6,000

As a Sponsor you will receive:

- Three complimentary registrations to the Federal Tax Forum. Names must be sent in at time of submitting application. Sponsorships are on a first-come, first-served basis.
- The use of a 6' display table in a prominent location during your sponsored event.
- A sign with your company logo prominently displayed at the sponsored function.
- Sponsor name in conference program with sponsored event.
- Following the conference you will receive a complete list of all attendees with name/company/title/address.

Method of Payment

☐ Please charge the following card:

☐ VISA

☐ MasterCard

☐ American Express

Card Number

Expiration Date

CCV:

Print Cardholder's Name

Cardholder's Zip Code

Signature



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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:

83rd Annual Federal Tax Forum
April 24 -25, 2017
Westin Houston Memorial City
945 Gessner Rd.
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 6' display table will be made available to each sponsoring and exhibiting company April 24 - 25, 2017.
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 Westin Houston Memorial City Hotel, 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 10, 2017; 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 Rd.
Houston, TX 79056

Company/Organization

Representative's Name (Please print)

Representative's Signature

Date Signed



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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.

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