

Signature Scientific Microarray Conference

The Premier Cytogenetic Microarray CGH Conference

Friday, June 17, 2011 to Saturday, June 18, 2011

(Non Exhibitor Pre-Conference Session: Thursday June 16, 2011 2:30pm to 5:30pm)

DoubleTree by Hilton Hotel Spokane City Center

Spokane, WA USA

EXHIBITOR PROSPECTUS

Exhibit Venue

DoubleTree by Hilton Hotel Spokane City Center

(509) 455-9600

322 North Spokane Falls Court, Spokane, Washington, United States 99201

Hotel Contact: Gina Mazzeo Direct Line: 509-744-2313

Exhibitor Booth Orders (Electricity/Internet/AV): Presentation Services www.doubletree1.hilton.com

Exhibit Information

Signature is, once again providing an intimate exhibit venue for the SSMC Conference (first come-first served). Exhibit Application with full payment is due on or before **Friday, May 13, 2011**.

Included in the exhibit fee is a 10'x6' carpeted space located in the food service hall. All general session breaks will take place in this area. Exhibits will include one 6ft. black draped table and two side chairs. Each exhibitor will receive two complimentary exhibitor badges that will include conference meals. Additional exhibitor badges are available for \$150 each and must be arranged through Annie Hudson, Marketing Specialist at (509) 944-4225 or Annie.Hudson@PerkinElmer.com.

Minimal storage is available at the venue site. Please contact Gina Mazzeo at the DoubleTree for more information concerning shipping and storage. The DoubleTree by Hilton Hotel Spokane City Center has limited electrical outlets located in the exhibit area. For electrical service and rentals including wireless/wired internet, pipe & drape, or AV equipment please contact DoubleTree's designated provider, **Presentation Services** through the DoubleTree website at www.doubletree1.hilton.com.

Exhibit Days and Hours

All General Session breaks will be located in the Exhibit Hall (Salon IV)

Install Hours: Friday, June 17 6:00am to 8:00am

If the exhibit hall is empty the evening of Thursday, June 16, exhibitors will be allowed to install their displays that night from 7:30pm to 10:30pm. This information will not be known until the week of 6-13-11.

Exhibit Hours: Friday, June 17 8:00am to 9:00am (Registration/Breakfast with the Exhibitors)

10:30am to 11:00am (Morning Break)

12:00 noon to 1:30pm (Lunch)

2:30pm to 3:00pm (Afternoon Break)

Saturday, June 18 8:00am to 9:00am (Breakfast with the Exhibitors)

10:30am to 11:00am (Morning Break)

Exhibit Dismantle: Saturday, June 18 11:15am to 1:00pm

Conference End: Saturday, June 18 11:30am

The Friday evening reception at 6:00pm will be held in the Spokane Falls Ballroom at the DoubleTree. Exhibitors are welcome to attend this event as guests of Signature Genomics and/or event sponsors.

**2011 Signature Scientific Microarray Conference
Spokane, Washington USA
June 16-18, 2011**

Application/Cancellation Deadline: Friday, May 13, 2011

Contact Information

Signature Genomics from PerkinElmer, Inc.
2820 North Astor Street, Spokane, WA 99207 USA
Attn: Annie Hudson
Email: Annie.Hudson@PerkinElmer.com
Direct Line Phone: (509) 944-4225 Fax: (509) 944-4295

(Faxed and emailed applications MUST be accompanied by credit card payment. If you are paying by check, please mail payment and application to the above address.)

Your Company Information

Company Name _____

Company Address _____
City State Zip

Contact Person Submitting Application _____

Company Contact Email & Phone _____

Exhibit Staff #1: Name & On-Site Phone _____

Exhibit Staff #2: Name & On-Site Phone _____

Our company would like to participate by reserving the following opportunities:

Exhibit Fee

Required Exhibit Fee per display **\$950.00** \$ _____

Exhibit Fee includes 10'x6' carpeted space, one 6 foot black-draped table, 2 side chairs, program acknowledgement, and two complimentary staff badges that include all conference meals. For more information regarding additional exhibit staff badges, please contact Annie Hudson.

Sponsorship Opportunities (*Exclusive of Exhibit Fee*)

Friday Breakfast: **\$1,800.00** \$ _____

Friday Lunch: **\$3,200.00** \$ _____

Friday Evening Reception: **\$6,500.00** \$ _____

Saturday Breakfast: **\$1,800.00** \$ _____

Refreshment Breaks:

Friday morning break: **\$900** \$ _____

Friday afternoon break: **\$900** \$ _____

Saturday morning break: **\$900** \$ _____

Advertising Opportunities in Program/Abstract Book

Inside Front Cover Program Ad: **\$600** \$ _____

Inside Back Cover Program Ad: **\$600** \$ _____

Program Ad: **\$300** \$ _____

(All program advertising: Full Page 8.25"x11" 4 Color)

\$ _____ **Total**

Total 2011 SSMC Exhibit Fee Due: \$ _____

Method of Payment:

Check (Please make checks payable to Signature Genomics and mail to the above address, Attn: Annie Hudson)

Credit Card (Visa MasterCard AmEx Other _____)

Credit Card Number _____ Exp. Date _____ Security Code _____

Name as it appears on the card (*please print*) _____

Card holder signature _____

Billing Address _____ State _____ Zip _____

2011 SSMC Exhibitor Terms and Conditions

The exhibition is a complement to the 2011 SSMC program sessions by informing and educating the attendees on the latest developments, scientific advancements and services of Microarray CGH and Medical Laboratory Genetics.

Adherence to Terms/Contractual Agreement

As a condition of exhibiting, and when applying for space, the exhibitor agrees to adhere to all conditions and regulations outlined. Exhibitors or their representatives who conduct themselves in an unprofessional manner may be dismissed from the exhibition without refund or appeal. *Signature* reserves the right to amend any and all rules and regulations at any time.

Eligibility to Exhibit

Signature reserves the right to determine acceptability of applications for exhibit space. Applications and proposed exhibits will be accepted or rejected based on criteria including, but not limited to, the products' or services' professional or educational benefit to the attendees; products or services consistent with the mission, purpose, and goals of *Signature*; and spatial constraints in the exhibit area.

Booth Space Cancellations/Reduction of Space

Notification of cancellation or reduction of booth space must be in writing. Deadline dates are outlined in the Exhibit Prospectus. There will be no refund for exhibitors who for any reason do not exhibit and have not submitted a written cancellation request prior to stated deadlines. Any space not claimed and occupied for which no special arrangements have been made prior to the exhibition opening may be resold or reassigned by *Signature* without obligation on the part of *Signature* for any refund whatsoever.

Booth Design and Arrangement

Exhibitors must show good judgment and consideration. The exhibit area is carpeted in the DoubleTree by Hilton Hotel Spokane City Center. All displays and decorations must be fireproof. Exhibitors are responsible for compliance with the Americans With Disabilities Act (ADA) within their booth and assigned space.

Liability and Indemnification

Exhibitors must surrender the space occupied in the same condition as received. Exhibitors are required to strictly comply with all terms of their agreement as contained in the Exhibit Prospectus, Exhibitor Application/Contract, and exhibitor correspondence as well as all applicable terms and conditions contained in the agreement with *Signature Genomics from PerkinElmer, Inc.* Exhibitors assume responsibility and agree to indemnify and defend *Signature Genomics from PerkinElmer, Inc.* and DoubleTree by Hilton Hotel Spokane City Center and their respective officers, directors, members, employees and agents against any claims or expenses arising out of the use of the exhibition premises. Exhibitors understand that neither *Signature Genomics from PerkinElmer, Inc.* nor DoubleTree by Hilton Hotel Spokane City Center maintains insurance covering the exhibitors' property and it is the sole responsibility of each exhibitor to obtain such insurance.

Security

Signature Genomics from PerkinElmer, Inc. does not provide security of the exhibit area.

Cancellation of the Annual Meeting

It is mutually agreed that in the event that the Signature Scientific Microarray Conference (SSMC) meeting is cancelled due to disaster, strike, labor dispute, governmental intervention, malicious damage, acts of war, or other causes which then and thereupon the agreement will be terminated and *Signature* will determine an equitable basis for the refund of such portion of the exhibit fee as is possible, after due consideration of expenditures and commitments already made.

AGREEMENT

(Please make a copy for your records)

The individual signing this contract is an authorized representative of the company with the full power and authority to sign and deliver this contract. A signature on this application indicates understanding and agreement to comply with all policies, terms and conditions in the 2011 SSMC Exhibitor Prospectus, including but not limited to, the Exhibitor Terms and Conditions and any others issued by *Signature Genomics from PerkinElmer, Inc.* regarding the 2011 SSMC Conference.

Signature	_____
Print Name	_____
Title	_____
Date	_____