APPLICATION TO EXHIBIT/SPONSOR

Company Name:		
Contact First Name:	Contact Last Name:	
Title:	Email address:	
Address Line 1:		
Address Line 2:		
	State: Postal Cod	
Website Address:		
List or describe good/services your com	pany plans to exhibit:	
Additional Exhibit Death Demonstral (1).		
Additional Exhibit Booth Personnel (2):		
Select Sponsor Level	Platinum (\$1,600)	Gold (\$1,400)
1	Silver (\$1,200)	Bronze (\$1,000)
	nultiple opportunities except for those ma	rked with an *)
Wednesday Lunch (1,000)	Wednesday Night Mixer (\$1,500)	
Thursday. Lunch(\$1,500)	Promotional Item* (\$3,000)	Mobile App* (\$5,000)
Fee Calculation: Sponsor Level	_ + Additional Sponsor Opportunities	= TOTAL DUE \$
I/We agree to the Exhibitor Rule	es and Regulations and the additional Requi	rements of the Renaissance.
Signed:	Date:	

Remit to:

California Association of Code Enforcement Officers 6939 Sunrise Blvd., Ste. 119 Citrus Heights, CA 95610 mbobrow@caceo.us — Email | (866) 508-3947