



# CDO Investors Conference

OCTOBER 4, 2006

Grand Hyatt Hotel + New York

## SPONSORSHIP AGREEMENT

If you are interested in becoming a sponsor at The Bond Market Association's CDO Investor's Conference to be held at the Grand Hyatt New York on October 4<sup>th</sup> please complete this form and fax it back to Jenifer Walter at 646.637.9112.

### PLEASE SELECT YOUR PREFERRED SPONSORSHIP PACKAGE BELOW:

- Exhibit Only:** Includes 6'x30" draped tabletop exhibit throughout the meeting. *Electric, telephone and Internet connectivity is available from hotel at an additional fee.* One complimentary registration and two "exhibit only" staff registrations. \$3,000
- Lead Sponsor:** Includes four complimentary registrations, a tabletop exhibit and logo on tote bag. \$12,000
- Patron Sponsor:** Includes three complimentary registrations and a tabletop exhibit. \$10,000
- Advocate Sponsor:** Includes two complimentary registrations and a tabletop exhibit. \$7,500
- Breakfast:** Includes two complimentary registrations. \$7,000
- Refreshment Breaks - Two opportunities available**  
Includes one complimentary registration. \$5,000
- Lunch:** Includes three complimentary registrations. \$10,000

### All Sponsors Receive:

- Logo and link on conference web page and select marketing materials
- Promotional literature included in registration packet
- Listing in program agenda distributed at the event
- Listing in with logo and firm description on flyer distributed in registration packets
- Recognition on event signage
- Mailing list of attendees, including mailing addresses, phone and fax numbers prior to and post conference for one time use each.

### SPONSOR CONTACT

Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Company (as it should appear on all materials) \_\_\_\_\_  
 \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Fax \_\_\_\_\_  
 Email \_\_\_\_\_  
 URL (for link) \_\_\_\_\_

### PAYMENT

Enclosed is a check payable to The Bond Market Association in the amount of \$ \_\_\_\_\_  
 VISA    MasterCard    American Express  
 Card Number \_\_\_\_\_  
 Expiration Date \_\_\_\_\_  
 Signature \_\_\_\_\_

### ADDITIONAL INFORMATION

- Full payment must accompany your application.
- If it becomes necessary for you to cancel, a refund will be made less a 20% service charge.
- After September 13, 2006 no refunds will be made.