

BILLING OPTIONS

Sponsoring Company/Organization: _____

Choose from the following billing options:

We require an electronic invoice to the following email address: _____

We will remit our payment to:
Storage Networking Industry Association
PO Box 894001
Los Angeles, Ca 90189-4001

We wish to pay our invoice via credit card (Visa / MasterCard / Discover/ AMEX):
Cardholder Name: _____ Card Number: _____
Expires: _____ Cardholder Phone: _____

TERMS AND CONDITIONS APPLICABLE TO ALL SPONSORSHIP COMMITMENTS

- 1) Payment in full is due 30 days from issue date of SNIA invoice.
- 2) Responsibility of copy and logo accuracy – the Advertiser/Sponsor agrees to indemnify and save harmless the SNIA and /or its agents from any liability, loss, and expense of any nature arising out of the display of any graphics, text, display, logo, and illustrations supplied by the Advertiser/Sponsor.

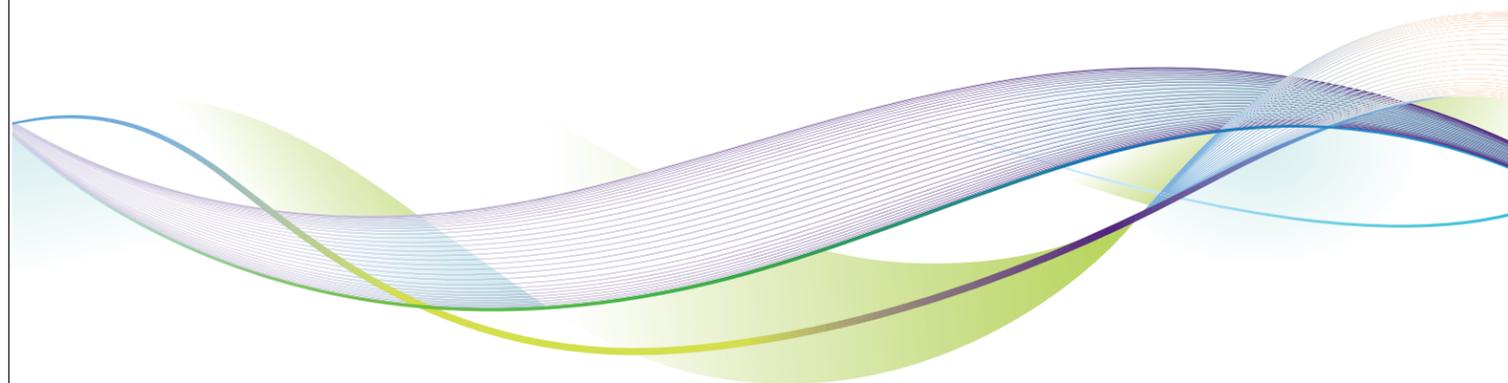
Approved by SNIA: _____
Signature Date

Printed Name Title

Please submit pages 3 & 4 of this document as a pdf to membership@snia.org or fax your order to 415.402.0009.



2011-2012 SPONSORSHIP OPPORTUNITIES



www.snia.org/sponsorship

