



Participation Agreement

1. Name, Date and Site(s) of Promotion Event/Service:	3. Number of Employees <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-299 <input type="checkbox"/> 250-499 <input type="checkbox"/> 500-999 <input type="checkbox"/> 1,000+						
2. Participants' and Company's Name(s), Address, E-Mail Address, Telephone and Fax Numbers:	4. Company contact Information if different from 2:						
5. Company/Participant is <input type="checkbox"/> New-to-Export <input type="checkbox"/> New-to-Market <input type="checkbox"/> Old-to-Market							
6. Name and contact information (address, telephone, fax, e-mail) of overseas representative(s) responsible for marketing Company's/Participants products in the trade event country or countries, if not listed above.							
7. Participation fee <input type="checkbox"/> cc info attached <input type="checkbox"/> check mailed (<i>Make check payable to U.S. Department of Commerce</i>)							
8. Additional information, if needed (description of displays, products or services being provided or promoted.							
9. Company/Participant agrees to abide by the terms of the attached Conditions of Participation, which form a part of this agreement, and acknowledges that information provided by Company/Participant to the Department of commerce in connection with this event or service may be made available to the public.	_____ Date						
_____ Signature of Duly Authorized Company/Participant's Representative							
_____ Print Name and Title							
U.S. Government Use Only							
10.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">TOTAL AMOUNT DUE</td> <td style="width: 20%; text-align: right;">\$</td> </tr> <tr> <td>AMOUNT RECEIVED</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>BALANCE DUE</td> <td style="text-align: right;">\$</td> </tr> </table>	TOTAL AMOUNT DUE	\$	AMOUNT RECEIVED	\$	BALANCE DUE	\$
TOTAL AMOUNT DUE	\$						
AMOUNT RECEIVED	\$						
BALANCE DUE	\$						
12. Approved for Commerce							
UNITS	_____ First Initial						
_____ Print Name and Organization							
11. _____ Officer's Last Name							

This information collection is authorized by law (15 U.S.C. 1501 et seq. 15 U.S.C. 171 et seq.) Although you are not required to respond, no agreement may be concluded for Company's/Participant's participation in a U.S. Department of Commerce-scheduled promotional event/service unless a completed Participation Agreement form has been received. Public reported burden for this collection of information is estimated to be 20 minutes per response, including the time for reviewing instructions, and completing and reviewing the collection of information. Notwithstanding any other provision of law, no person is required to respond, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of displays a current valid OMB Control Number. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Clearance Officer, International Trade Administration, Department of Commerce, Room 4001, 14th St. and Constitution Avenue, N.W., Washington, DC 20230.