

Please check the appropriate box: I will be attending as an Attendee Exhibitor

Organization Name

Participant #1 First Name..... Last Name.....

Phone: Fax:

Address:

City:..... State: Zip/Code Country:

Email: Company Website:



Please Check here if you require special service

Please Check here if special dietary needs are requested

Please check the appropriate box Exhibitor Participant# 2

Organization Name

Participant #2 First Name..... Last name.....

Phone: Fax:

Address:

City:..... State: Zip/Code Country:

Email: Company Website:



Please Check here if you require special service

Please Check here if special dietary needs are requested

This exhibit space application will become a contract upon acceptance and subject to the exhibition rules and regulations applied by NDIA and **The Security Network**. A full copy will be sent to you upon registration.

Competitor/Exhibitor signature..... Date:

Printed Name: Phone:

Send all completed registration forms with
Payment to
The Security Network
11230 Sorrento Valley Rd. Suite 160
San Diego, CA 92121

Phone: 858-455-8760 ext. 762
Fax: 858-455-8765
E-mail: coordinator@thesecuritynetwork.org

**Exhibitor
Fees**

**Attendee
Fees**

NDIA member & Paid Sponsors of The Security Network	\$2300 per 10' X 10" booth
NDIA Member	\$2500 per 10' X 10" booth
Non-NDIA Member	\$2700 per 10' X 10" booth
Government and Individual Members of The Security Network	
Attendees	\$200
	\$300

Unregistered attendees will only be admitted on the day if there is space available and subject to an additional administration fee of \$25.

Make Checks Payable to *The Security Network*
Credit Card Payments may be made online at www.thesecuritynetwork.org

* Payment & Registration **MUST** be received by December 27, 2007