



2024 ADDITIONAL LISTING CONTRACT

24 – 28 March 2024 • San Diego Convention Center, San Diego, California, USA

Return signed contract with deposit to: OFC Exhibits, c/o Optica, 2010 Massachusetts Ave., NW, Washington, DC 20036 USA
Tel: +1 202.416.1988 Email: sales@ofcconference.org

1 EXHIBITING COMPANY INFORMATION

Company Name: _____ Booth #: _____

2 EXHIBITING COMPANY PRIMARY LOGISTICS CONTACT

Name: _____ Job Title: _____

Email: (main mode of communication—print clearly): _____

Tel: _____ Fax: _____ Skype ID: _____

Additional Listing Benefits	Included	Not Included
Separate Online Company Profile Login and Dashboard	✓	
Company Profile Information in Printed Buyers' Guide	✓	
Company Profile Information Displayed Online and in Conference App	✓	
Access to Exhibitor Hotel Discounts	✓	
Identification Sign - to order additional ID signs, contact Exhibit Operations at exhibits@ofcconference.org		⊗
Exhibitor Registration Dashboard Account - Only the main exhibiting company can register staff		⊗

3 ADDITIONAL LISTINGS - USD 250 FOR EACH ADDITIONAL COMPANY

① ADDITIONAL LISTING COMPANY CONTACT — to receive all information for this profile

Company Name: _____

Contact Name: _____ Job Title: _____

Email: (main mode of communication—print clearly): _____

Tel: _____ Fax: _____ Skype ID: _____

Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____ Country: _____

② ADDITIONAL LISTING COMPANY CONTACT — to receive all information for this profile

Company Name: _____

Contact Name: _____ Job Title: _____

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Tel: _____ Fax: _____ Skype ID: _____

Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____ Country: _____

4 CONTRACT AUTHORIZATION: By signing below, with or without appropriate payment, this contract shall become a legally binding contract. The individual signing this document represents that he/she is duly authorized to execute this binding contract on behalf of the exhibitor. By signing this agreement, Exhibitor agrees to abide by and be bound to this Contract, Exhibition Rules and Regulations, any additional rules and regulations published by OFC Management, and the following documents (which are hereby incorporated by reference as part of this Contract) as they may be amended by OFC Management from time to time: OFC Exhibitor Service Manual (inclusive), OFC Code of Conduct (available at ofcconference.org/codeofconduct), and OFC Privacy Policy (available at ofcconference.org/privacy-policy).

Authorized Representative Signature: X _____ Date: _____

Authorized Representative Name (Please print.) _____

5 PAYMENT— Remit to Address: Optica, 2010 Massachusetts Ave., NW, Washington, DC 20036 USA. Please reference your company name, invoice number and OFC 2024 on all payments. Past-due balances are subject to a 5% late fee. Direct inquiries to accounts@ofcconference.org **PAYMENT OPTIONS: Check:** Make checks payable (USD\$, drawn on a US bank) to "Optica" referencing OFC 2024 on the memo line. Mail check to Optica, c/o Exhibit Sales, 2010 Massachusetts Ave, NW, Washington, DC 20036 USA. Include a copy of this invoice. **Credit Card:** A convenience fee of 3% will be charged on all credit card payments. **Wire Transfer or ACH/Direct Deposit:** Bank: Bank of America, 1501 Pennsylvania Ave, NW, Washington, DC 20013, USA. Account Name/Beneficiary: Optica; Account Number: 0020-867-84-287; ABA/Routing Number: 026-00959-3 (Wires Only), 054-00120-4 (ACH Only); SWIFT: BOFAUS3N; Please include the remitter's name, invoice number 622-XXXX and OFC 2024. Remitter is responsible for all wire transfer fees, including a USD 25 processing fee for Bank of America. Check with your bank for additional wire transfer fees.

Credit Card: ☐ Visa ☐ M/C ☐ Diners ☐ AmEx

Amount: _____ Card No: _____ Exp. Date: _____ CVV: _____

Print Name (as it appears on card): _____ Billing Zip/Post Code: _____

Cardholder Signature: _____ Date: _____