



# Sharpen Your Focus

April 10-11, 2012  
San Francisco, CA

A Two-Day Event Focusing on Retail, Wholesale, Correspondent Lending and Industry Information, Preparing You for Tomorrow's Mortgage Lending Market

## CMBA 3rd Annual Sales & Marketing Conference

Sponsor-Exhibitor Brochure

*Gold Sponsors*



PLAZA HOME MORTGAGE



*Conference Sponsors*



*Meal Sponsors*





# SPONSOR APPLICATION

Please indicate your sponsorship level & fax the completed form to (916) 446-7105. The sponsorship form must be received before 4/2/12 for company name to be included in conference program. Note: requests for refunds must be submitted in writing to CMBA. Cancellations received by February 17, 2012 shall be entitled to a 50% refund. No refunds will be issued after February 17, 2012. Please send check to CMBA at 555 Capitol Mall, Ste. 440, Sacramento, CA 95814.

*Limited Opportunity  
Only 4 Available!*

## RECEPTION BAR SPONSOR - \$7,500

The evening receptions are the signature social events at the CMBA Sales & Marketing Conference. Here attendees gather for an unparalleled opportunity to get to know their industry peers in a fun, relaxed environment. Sponsorship is limited to two co-sponsors at each of the two evening receptions and provides plenty of recognition opportunities in conference materials and during the reception.

- ◆ One 8' x 10' Booth Exhibit Space if reserved
- ◆ 6 Conference Registrations (5 for non-CMBA member companies)
- ◆ Opportunity to do a prize giveaway during the reception
- ◆ Recognition as Sponsor on reception signage
- ◆ Recognition as Reception Bar Sponsor in CMBA newsletter and website
- ◆ Full page ad in conference program (provided electronically)
- ◆ Opportunity to place marketing materials in conference attendee bags
- ◆ Pre- and Post-Conference registration lists with full contact information

## GOLD SPONSOR - \$5,000

- ◆ One 8' x 10' Booth Exhibit Space if reserved
- ◆ 5 Conference Registrations (4 for non-CMBA member companies)
- ◆ Ability to make brief presentation to attendees during event
- ◆ Recognition as Gold Sponsor on event & reception signage
- ◆ Recognition as Gold Sponsor in CMBA newsletter and website
- ◆ Full page ad in conference program (provided electronically)
- ◆ Opportunity to place marketing materials in conference attendee bags
- ◆ Pre- and Post-Conference registration lists with full contact information

**Please check sponsorship level**

Reception Bar Sponsor

Gold Sponsor

Please contact  
Stacey Ward at the  
CMBA office, or  
stacey@cmba.com for  
additional sponsorship  
information.

CMBA Tax ID  
94-1701188

Please provide the contact information for the person responsible for all sponsorship correspondence:

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Please provide the company information to be included in the conference program, and attach a 25-word description:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

**Please complete the credit card information below:**

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name on card: \_\_\_\_\_



# SPONSOR APPLICATION

Please indicate your sponsorship level & fax the completed form to (916) 446-7105. The sponsorship form must be received before 4/2/12 for company name to be included in conference program. Note: requests for refunds must be submitted in writing to CMBA. Cancellations received by February 17, 2012 shall be entitled to a 50% refund. No refunds will be issued after February 17, 2012. Please send check to CMBA at 555 Capitol Mall, Ste. 440, Sacramento, CA 95814.

## BREAKFAST, LUNCH or CONFERENCE BAG SPONSOR - \$2,000

- ◆ 2 Conference Registrations (1 for non-CMBA member companies)
- ◆ Recognition as Sponsor on event signage
- ◆ Recognition as Sponsor in CMBA newsletter and website
- ◆ Half page ad in conference program (provided electronically)
- ◆ Opportunity to place marketing materials in conference attendee bags
- ◆ Pre- and Post-Conference registration lists with full contact information

## SESSION SPONSOR - \$750

- ◆ Recognition as Sponsor on event signage
- ◆ Opportunity to place marketing materials in conference attendee bags
- ◆ Pre- and Post-Conference registration lists with full contact information

Please check  
sponsorship level

Breakfast/Lunch  
or Conference Bag  
Sponsor

Session Sponsor

Please contact  
Stacey Ward at the  
CMBA office, or  
stacey@cmba.com for  
additional sponsorship  
information.

CMBA Tax ID  
94-1701188

Please provide the contact information for the person responsible for all sponsorship correspondence:

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Please provide the company information to be included in the conference program, and attach a 25-word description:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

**Please complete the credit card information below:**

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name on card: \_\_\_\_\_



# EXHIBITOR APPLICATION

## PREMIER EXHIBIT BOOTH - \$1,500

- ◆ One 8' x 10' Booth Exhibit Space
- ◆ 3 Conference Registrations  
(2 for non-CMBA member companies)
- ◆ Pre- and Post-Conference registration lists  
with full contact information

Please fax the completed form to (916) 446-7105. The exhibitor application must be received before 4/2/12 for company name to be included in conference program. If paying by check, Please send to CMBA at 555 Capitol Mall, Ste. 440, Sacramento, CA 95814.

**Note:** an additional \$200 late registration fee will be charged for booth reservations received after March 16, 2012.

**Cancellations/Refunds:** Should the exhibitor be unable to occupy and use the contracted exhibit space, CMBA must be notified in writing. Cancellations received by February 17, 2012 shall be entitled to a 50% refund. No refunds will be issued after February 17, 2012

Please provide the contact information for the person responsible for all exhibitor correspondence:

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Please provide the company information to be included in the conference program, and attach a 25-word description:

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

Please complete the credit card information below:

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Name on card: \_\_\_\_\_

Please check sponsorship level

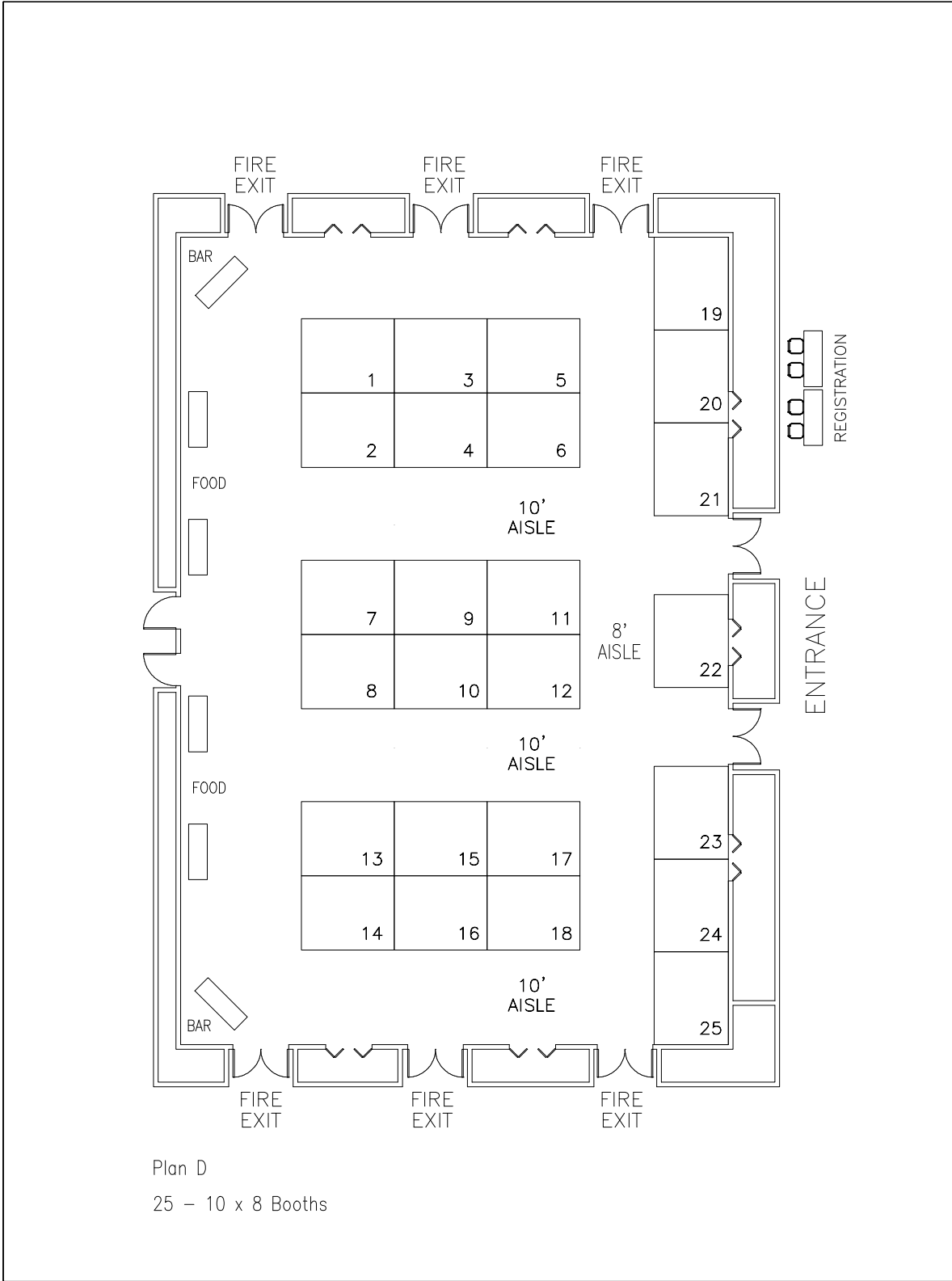
Premier Exhibit Booth

Please contact Stacey Ward at the CMBA office, or [stacey@cmba.com](mailto:stacey@cmba.com) for additional information.

CMBA Tax ID  
94-1701188



# EXHIBIT HALL LAYOUT



**EVENT PRODUCTIONS INC.**

651 West Tower Ave  
Alameda, CA 94501

800/234-8064

**CMBA  
2012**

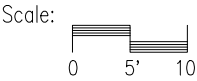
California  
Mortgage  
Bankers  
Association

Westin  
SF Airport

Westin  
Ballroom

1 OLD BAYSHORE HWY  
MILLBREA, CA

Event Date:  
April 10, 2012



Date:  
3/14/2012



# CONFERENCE SPONSORS

**Please use this form to provide registration information for the complimentary sponsor and exhibitor registrations included in your selected sponsorship/exhibitor level. Return this form along with sponsor/exhibitor application.**

## Registration #1

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Company: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## Registration #2

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Company: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## Registration #3

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Company: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## Registration #4

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Company: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_