

Return to SCTE•ISBE Headquarters

- **August 15** Product Index Form
 Directory Listing Form
- **September 1** Exhibitor Meeting Room Request Form
- **September 15** EAC/Work Authorization Request Form
- **September 22** Agreement/Attendee List Request Form
- **October 3** Live Entertainment Form
- **Online Only** Exhibitor Badge Request Form (online thru October 13)
- **Online Only** Exhibitor Badge Change Form (online thru October 6)

Return to SCTE•ISBE /Wyndham Jade Housing

- **Monday, July 31** Exhibitor Housing Block Request
- **Monday, August 14** Exhibitor Rooming List
- **Friday, September 22** Exhibitor Housing Change
- **Thursday, September 21** Individual Housing Request

General Information

All sleeping room accommodation for SCTE•ISBE's Cable-Tec Expo® will be handled through SCTE•ISBE/Wyndham Jade Housing. Participating hotels will not honor direct reservations, and published room rates apply only to rooms reserved through the SCTE•ISBE/Wyndham Jade Housing Block.

For each official Cable-Tec Expo 2017 hotel, 50% of the rooms in the official blocks will be assigned to exhibitor personnel, with the remaining 50% of rooms reserved for attendees.

SCTE•ISBE will provide complimentary transportation between the Denver Convention Center and official overflow hotels during show dates, if necessary.

It is critical that the Society fulfill their commitment to the city of Denver and official Cable-Tec Expo 2017 hotels by honoring the contracted hotel blocks. Hotel blocks are based on the show's history. We rely on a solid citywide sleeping rooms pick up to acquire the exhibit space we need in future Expo cities, and to provide the complimentary amenities our exhibitors have grown accustomed to receiving. Therefore, not to be punitive, but to continue to provide the services we have in the past, **exhibitors who reserve sleeping rooms outside the SCTE•ISBE Cable-Tec Expo® block will be penalized by, but not limited to: 1) a reduction of current exhibitor points and/or forfeiture of future exhibitor points; 2) a per badge charge for exhibitor badges*; 3) forfeiture of complimentary full registrations regardless of Expo Partner status*; 4) meeting space rental fees*; and 5) refused access to shuttles that are complimentary to complying exhibitors and attendees.**

*See individual forms for specific breakout of penalty fees.

Housing Accommodations

Please complete the Exhibitor Housing Block Request Form in its entirety prior to returning it to SCTE•ISBE/Wyndham Jade Housing. Incomplete forms will not be processed. Please make sure that you do not "straight-line" your block. Also, make sure you include accurate arrival and departure dates (see form for example).

Hotels will be assigned as follows for Cable-Tec Expo 2017: Hotels will be assigned on a first-come, first-served basis depending on the date the housing block form is received. Guest rooms are always subject to availability.

Your Exhibitor Housing Block Request Form is due on or before July 31, 2017. Once you have sent in your request, you will receive a letter and confirmation of your block within five business days.

In addition to online, the Exhibitor Rooming List Form is available in PDF format, so you can fax or mail your rooming list. To complete this information online, use your web identification number. Either way, your rooming list must be completed and returned to SCTE•ISBE/Wyndham Jade Housing no later than August 14, 2017 (If you do not provide all names on this rooming list by August 14, 2017 any rooms held in your block without names will be released for general sale).

Within one week, you will receive a formal rooming list from SCTE•ISBE/Wyndham Jade Housing. Please review the list to ensure all information is accurate. You have until September 22, 2017 to make any changes to your rooming list. After this date, changes will be determined upon hotel availability.

A credit card **guarantee** is required in order to reserve a room. Acceptable credit cards are American Express, Visa and MasterCard only. Hotel may charge credit cards prior to arrival. The **deposit** may be made via credit card or check, payable to SCTE•ISBE/Wyndham Jade Housing. (All checks must be in U.S. funds drawn on a U.S. bank.)

Please refer to your assigned hotel's policies regarding cancellation, early departures, etc. SCTE•ISBE is not responsible for charges incurred by failure to comply with hotel policy.

If occupants of rooms are known at this time, please submit on the Exhibitor Rooming List Form. Include all of the names, dates of arrival and departure, deposit information and return to SCTE•ISBE/Wyndham Jade Housing. If occupants are unknown at this time, you will receive a block confirmation letter stating your hotel(s) room block location and deadline to submit names.

Please call 866-268-0194 or 972-349-5432 if you have any questions.

IMPORTANT

Group Attrition Policy

Should the actual room nights utilized by the exhibiting company be less than 90% of the Total Room Nights booked by August 14, 2017, the Group agrees to pay SCTE•ISBE for the number of sleeping rooms not utilized up to 90% of the Total Room Nights booked.

Example: The Exhibiting Company contracts for 100 room nights by August 14, 2017. Should the Group actually utilize 85 room nights, the Group would need to pay for the number of room nights not utilized up to 90% of the total room nights.

i.e.	100 room nights	Guaranteed by Group
	90 room nights	Allowable Without Penalty
	-85 room nights	Actually Utilized by Group
	5 room nights	Variance

Five (5) room nights x cost of room, inclusive of tax and occupancy charges, is the additional dollar amount owed to SCTE•ISBE and is due within 30 days of receipt of invoice.

Group Cancellation Policy

All group cancellations must be made in writing and sent via mail or fax to SCTE•ISBE/Wyndham Jade Housing, 6100 W. Plano Parkway, Suite 3500, Plano, TX 75093: fax: 972-349-7715



DENVER, CO
OCTOBER 17-20

EXHIBITOR HOUSING BLOCK REQUEST FORM

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

Form Will Not be Processed Without Signature Agreeing to Group Attrition Policies and Method of Payment

Company Booth #

Contact name

Address Street/PO Box City State Zip code

Phone Fax

E-mail

I agree to the attrition and cancellation policy, and penalties for booking rooms outside the official block as stated in the exhibitor housing instructions.

Signature Date

The contact listed above is the ONLY representative from your company authorized to request rooms or make changes. A request to change the contact name must be made in writing to SCTE•ISBE/Wyndham Jade Housing.

Hotel Preferences (If your choice isn't available, SCTE•ISBE/Wyndham Jade Housing will place you in a comparable hotel.)

1	4
2	5
3	6

Block Pattern Please provide a night by night breakdown on your requested room block. Use the actual arrival and departure dates for your block. (Please see example for a block of 14 rooms.) **I would like to manage my block** Online Via fax

	Set Up				Exhibits Open			Dismantle
Rooms Needs	Saturday October 14	Sunday October 15	Monday October 16	Tuesday October 17	Wednesday October 18	Thursday October 19	Friday October 20	Saturday October 21
Example	1	2	5	10	14	14	10	5
Single (1 p./1 bed)								
Double (2 p./1 bed)								
Dbl/Dbf (2 p./2 beds)								
Suite								
<input type="checkbox"/> Guestroom <input type="checkbox"/> Hospitality # people? _____								

A credit card **guarantee** is required to reserve room(s). Hotel may charge credit cards prior to arrival! The **deposit** may be made via credit card or check, payable to SCTE•ISBE/Wyndham Jade Housing. (All checks must be in U.S. funds drawn on a U.S. bank.)

<h3>Form of Guarantee/Deposit</h3> <p><input type="checkbox"/> Check Payable to SCTE•ISBE/Wyndham Jade Housing</p> <p><input type="checkbox"/> American Express <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa</p> <p>Amount Enclosed \$ _____</p>	<p>Cardholder name _____</p> <p>Signature _____</p> <p>Card number _____ CVV# _____</p> <p>Expiration date _____</p>
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This form must be received at **SCTE•ISBE/Wyndham Jade** by **July 31, 2017**

SCTE•ISBE/Wyndham Jade Housing • 6100 W. Plano Parkway, Suite 3500, Plano, TX 75093
866-268-0194 • 972-349-5432 • Fax: 972-349-7715 • E-mail: scte@wyndhamjade.com • expo.scte.org



DENVER, CO
OCTOBER 17-20

AFFILIATE HOUSING BLOCK REQUEST FORM

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

Form Will Not be Processed Without Signature Agreeing to Group Attrition Policies and Method of Payment.

Company _____

Contact name _____

Address _____
Street/PO Box _____ City _____ State _____ Zip code _____

Phone _____ Fax _____

E-mail _____

I agree to the attrition and cancellation policy, and penalties for booking rooms outside the official block as stated in the group housing instructions.

Signature _____ Date _____

The contact listed above is the ONLY representative from your company authorized to request rooms or make changes. A request to change the contact name must be made in writing to SCTE•ISBE/Wyndham Jade Housing.

Hotel Preferences (If your choice isn't available, SCTE/ISBE/Wyndham Jade Housing will place you in a comparable hotel.)

1 _____	4 _____
2 _____	5 _____
3 _____	6 _____

Block Pattern Please provide a night by night breakdown on your requested room block. Use the actual arrival and departure dates for your block. (Please see example for a block of 14 rooms.) **I would like to manage my block** Online Via fax

Rooms Needs	Set Up				Exhibits Open			Dismantle
	Saturday October 14	Sunday October 15	Monday October 16	Tuesday October 17	Wednesday October 18	Thursday October 19	Friday October 20	Saturday October 21
Example	1	2	5	10	14	14	10	5
Single (1 p./1 bed)								
Double (2 p./1 bed)								
Dbl/Dbf (2 p./2 beds)								
Suite								
<input type="checkbox"/> Guestroom <input type="checkbox"/> Hospitality # people? _____								

A credit card **guarantee** is required to reserve room(s). Hotel may charge credit cards prior to arrival. The **deposit** may be made via credit card or check, payable to SCTE•ISBE/Wyndham Jade Housing. (All checks must be in U.S. funds drawn on a U.S. bank.)

Form of Guarantee/Deposit

- Check Payable to SCTE•ISBE/Wyndham Jade Housing
 American Express MasterCard Visa
 Amount Enclosed \$ _____

Cardholder name _____
 Signature _____
 Card number _____ CVV# _____
 Expiration date _____

This form must be received at **SCTE•ISBE/Wyndham Jade by July 31, 2017**

SCTE•ISBE/Wyndham Jade Housing • 6100 W. Plano Parkway, Suite 3500, Plano, TX 75093
 866-268-0194 • 972-349-5432 • Fax: 972-349-7715 • E-mail: scte@wyndhamjade.com • expo.scte.org



DENVER, CO
OCTOBER 17-20

EXHIBITOR/GROUP ROOMING LIST FORM

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

If the total block is reduced significantly after August 14, 2017 penalties in excess of one night's deposit will be incurred (see Exhibitor Housing Instructions, Group Attrition Policy). Additional penalties will be incurred for housing ANY or ALL rooms outside the official hotel block.

Please TYPE.

Company _____ Booth # _____

Contact name _____

Address _____
Street/PO Box _____ City _____ State _____ Zip code _____

Phone _____ Fax _____

E-mail _____

Name	Room Type	Arrival Date	Dept. Date	Roommate Names/Special Requests
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

Reproduce or duplicate this form as needed. If multiple credit cards are being used, please attach duplicate form.

A credit card **guarantee** is required to reserve room(s). Hotel may charge credit cards prior to arrival. The **deposit** may be made via credit card or check, payable to SCTE•ISBE/Wyndham Jade Housing. (All checks must be in U.S. funds drawn on a U.S. bank.)

Form of Guarantee/Deposit <input type="checkbox"/> Check Payable to SCTE•ISBE/Wyndham Jade Housing <input type="checkbox"/> American Express <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa Amount Enclosed \$ _____	Cardholder name _____
	Signature _____
	Card number _____ CVV# _____
	Expiration date _____

This form must be received at SCTE•ISBE/Wyndham Jade by August 14, 2017

SCTE•ISBE/Wyndham Jade Housing • 6100 W. Plano Parkway, Suite 3500, Plano, TX 75093
866-268-0194 • 972-349-5432 • Fax: 972-349-7715 • E-mail: scte@wyndhamjade.com • expo.scte.org



DENVER, CO
OCTOBER 17-20

EXHIBITOR HOUSING CHANGE FORM

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

Changes or substitutions must be made on this form and returned to SCTE•ISBE/Wyndham Jade Housing by September 22, 2017. If the total block is reduced significantly after August 14, 2017, penalties in excess of the one night's deposit will be incurred (see Exhibitor Housing Instructions; Group Attrition Policy). You may contact SCTE•ISBE/Wyndham Jade Housing for an update on room availability at each hotel. If the room is being shared, please indicate if both reservations are to be changed. Please TYPE.

Company _____ Booth # _____

Contact name _____

Address _____
Street/PO Box City State Zip code

Phone _____ Fax _____

E-mail _____

CHANGE FROM

CHANGE TO

1 Name _____

1 Name _____

Arrival date _____ Departure date _____

Arrival date _____ Departure date _____

2 Name _____

2 Name _____

Arrival date _____ Departure date _____

Arrival date _____ Departure date _____

3 Name _____

3 Name _____

Arrival date _____ Departure date _____

Arrival date _____ Departure date _____

4 Name _____

4 Name _____

Arrival date _____ Departure date _____

Arrival date _____ Departure date _____

5 Name _____

5 Name _____

Arrival date _____ Departure date _____

Arrival date _____ Departure date _____

6 Name _____

6 Name _____

Arrival date _____ Departure date _____

Arrival date _____ Departure date _____

7 Name _____

7 Name _____

Arrival date _____ Departure date _____

Arrival date _____ Departure date _____

8 Name _____

8 Name _____

Arrival date _____ Departure date _____

Arrival date _____ Departure date _____

Attach duplicate forms as needed.

Special requests:

This form must be received at SCTE•ISBE/Wyndham Jade by September 22, 2017

SCTE•ISBE/Wyndham Jade Housing • 6100 W. Plano Parkway, Suite 3500, Plano, TX 75093
866-268-0194 • 972-349-5432 • Fax: 972-349-7715 • E-mail: scte@wyndhamjade.com • expo.scte.org

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

1. Cable-Tec Expo exhibitor contacts are able to register all exhibitor personnel and guests online at expo.scte.org using a custom discount code. You will receive an e-mail containing the password and instructions for registering online. You can register online through October 20, 2017.

Please note the following:

Exhibitor personnel badge policies apply to exhibitors housing within the official Cable-Tec Expo hotel block. If either a portion or all sleeping rooms were acquired outside the SCTE-ISBE/Wyndham Jade Housing Bureau, your company will incur a fee of \$40 per badge and all complimentary full registrations forfeited. (See Exhibitor Housing Instructions)

2. Exhibitors will receive an allocation of Exhibit Hall Badges which may be used for company personnel or invited guests. Your company allocation is based on membership status and booth size. Please see table below.
3. Registrations for all sessions will be issued to each CAP, Expo Partner and Standards Member Companies according to the table below. Full Registrations include Opening General Session, Awards Luncheon and Workshops.
4. Individuals wishing to purchase additional Full Attendee Registrations must complete the official Cable-Tec Expo Attendee Registration Form; see attendee Event Registration at expo.scte.org
5. Please allow 24 hours for the processing of on-site badge requests.
6. A \$5 fee will be charged for each badge replacement on-site, whether lost, replaced, or for substitutions.
7. The company name, city and state will appear on the badge exactly as stated on the exhibit contract, unless other information is provided on the badge request form.

2017 Exhibitor Staff and Guest Registration Rate Schedule

BOOTH SIZE	CAP RATE	EXPO PARTNER OR STANDARDS MEMBER	NON-MEMBER
Exhibitor Full Conference Badges			
100 - 300 sq ft of space purchased	1 free full registration 2 additional at 50%	1 free and 2 at 50%	N/A
400 sq ft	2 free full registration and 3 at 50%	2 free and 3 at 50%	N/A
600 sq ft	4 free	4 free	N/A
800 sq ft	8 free	8 free	N/A
1,000 sq ft and above	10 free	10 free	N/A
Exhibitor Staff and Guest Floor Passes			
Formula	10 free per 100 sq ft; additional at \$30	5 free per 100 sq ft; additional at \$50	2 free per 100 sq ft; additional at \$75
100 sq ft	10 free; additional at \$30	5 free, additional at \$50	2 free, additional at \$75
200 sq ft	20 free; additional at \$30	10 free, additional at \$50	4 free, additional at \$75
300 sq ft	30 free; additional at \$30	15 free, additional at \$50	6 free, additional at \$75
400 sq ft	40 free; additional at \$30	20 free, additional at \$50	8 free, additional at \$75
600 sq ft	60 free; additional at \$30	30 free, additional at \$50	12 free, additional at \$75
800 sq ft	80 free; additional at \$30	40 free, additional at \$50	16 free, additional at \$75
900 sq ft	90 free; additional at \$30	45 free, additional at \$50	18 free, additional at \$75
1000 sq ft	100 free; additional at \$30	50 free, additional at \$50	20 free, additional at \$75
1200 sq ft	120 free, additional at \$30	60 free, additional at \$50	24 free, additional at \$75
1600 sq ft	160 free, additional at \$30	80 free, additional at \$50	32 free, additional at \$75
2000 sq ft	200 free; additional at \$30	100 free, additional at \$50	40 free, additional at \$75
2500 sq ft	250 free; additional at \$30	125 free, additional at \$50	50 free, additional at \$75



DENVER, CO
OCTOBER 17-20

MEETING ROOM REQUEST FORM

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

Groups requiring the use of meeting rooms in participating Expo hotel(s) must obtain authorization from SCTE•ISBE and absorb all costs including rental, if any. SCTE•ISBE will not provide approval should events compete with Cable-Tec Expo hosted events.

Contact info:
Melanie Taylor
mtaylor@scte.org
(610) 594-7332

Please TYPE

Company _____ Booth # (if applicable) _____

Contact Name _____

On-site contact name _____

Address work home
Street/PO Box _____ City _____ State _____ Zip Code _____

Phone work home _____ Fax _____

E-mail work home _____

Company/Employee Meeting Hospitality Function

Hotel Desired Space is limited and will be assigned on a first-come, first-served basis. Please e-mail mtaylor@scte.org, if you require further information.

Official Cable-Tec Hotel _____

Date(s) requested _____

Time(s) requested _____

Number of people _____

Room Set

Schoolroom (2 people per 6' or 3 people per 6')

Conference Hollow Square Theatre U-shape Rounds

Audio/Visual Equipment

Lectern microphone LCD Package Lavalier microphone TV/VCR Package

Handheld microphone Flipchart Package Screen

Telephone

Phone Line only Single line with phone Speaker phone with line Polycom speaker with line

Catering

Yes No

This form must be received at SCTE•ISBE Registration by September 1, 2017

SCTE•ISBE Registration • 140 Philips Rd., Exton, PA 19341 - 1318
Fax: 610-884-7126 • E-mail: expo@scte.org • expo.scte.org



DENVER, CO
OCTOBER 17-20

EAC/WORK AUTHORIZATION REQUEST FORM

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

All exhibitors using an independent service company MUST complete this form and return it to SCTE•ISBE along with a Certificate of Insurance by September 15, 2017. If you are using a third party contractor and your company does not provide the certificate, you will be prohibited from entering the exhibit hall.

Independent Service Company #1

Company Name _____

Contact Name _____

Address _____

Street/PO Box

City

State

Zip code

Phone _____

Independent Service Company #2

Company Name _____

Contact Name _____

Address _____

Street/PO Box

City

State

Zip code

Phone _____

Are these service companies authorized to order show services for your company? Yes No

Exhibiting Company _____ Booth # _____

Requested by _____

E-mail _____

Phone _____ Date _____

Please retain a copy of this form for your files.

This form must be received at SCTE•ISBE Registration by September 15, 2017

SCTE•ISBE Registration • 140 Philips Rd., Exton, PA 19341 - 1318

Fax: 610-884-7126 • E-mail: expo@scte.org • expo.scte.org



DENVER, CO
OCTOBER 17-20

AGREEMENT/ATTENDEE LIST REQUEST FORM

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

Please TYPE

Company _____ Booth # _____

Contact Name _____

Address _____
Street/PO Box

City _____ State _____ Zip code _____

Phone _____ Fax _____

E-mail _____

Exhibitor representative(s) must sign this Agreement/Order form and adhere to the following provisions:

1. This service is available to contracted Exhibitors ONLY and **will not include attendee phone, fax and/or e-mail data.**
2. Payment for list rental must accompany Agreement/Attendee List Request Form.
3. Attendees names/addresses are for one-time use only and will be used promptly upon receipt, within 30 days of the official Cable-Tec Expo 2017 show dates.*
4. The exhibitor will handle all names confidentially and is fully responsible for the security thereof. The names are not to be copied for any purpose or disclosed to any person without expressed written consent from Cable-Tec Expo 2017 show management.

I wish to purchase the:

Pre-Registered List

Post-Conference List

Electronic File (Excel)

\$695

\$945

*Attendee List requests received after November 17, 2017 will NOT be honored.
Lists will be distributed after September 22, 2017

Form of Payment

- Check Payable to SCTE•ISBE
 American Express MasterCard Visa
 Amount Enclosed \$ _____

Cardholder name _____

Signature _____

Card number _____ CVW# _____

Expiration date _____

Contributions or gifts to the Society of Cable Telecommunications Engineers, Inc. are not tax deductible as charitable contributions for federal income tax purposes.

This form must be received at SCTE•ISBE Registration by September 22, 2017

SCTE•ISBE Registration • 140 Philips Rd., Exton, PA 19341 - 1318
Fax: 610-884-7126 • E-mail: expo@scte.org • expo.scte.org



DENVER, CO
OCTOBER 17-20

LIVE ENTERTAINMENT FORM

OCTOBER 17-20, 2017 | COLORADO CONVENTION CENTER | DENVER, CO

Please TYPE

Company _____ Booth # _____

Contact Name _____

Address _____
Street/PO Box

_____ City _____ State _____ Zip code _____

Phone _____ Fax _____

E-mail _____

Per section 10-D of the Rules and Regulations, if your company is using live entertainment germane to your exhibit, please complete a scale schematic drawing which indicates location of staging, sound system and audience area.

Attach duplicate forms as needed.

This form must be received at **SCTE•ISBE Registration by October 3, 2017**

SCTE•ISBE Registration • 140 Philips Rd., Exton, PA 19341 - 1318

Fax: 610-884-7126 • E-mail: expo@scte.org • expo.scte.org