24-28 February

Moscone Convention Center San Francisco, California, USA

KMIP Interop Demonstration RSA 2020 Participation

OASIS reserved a 20x20 pavilion space (in the South Hall) on the RSA 2019 show floor for a KMIP Interop demonstration. A maximum of eight member companies will be able to participate. The cost per pod will be \$9,800. The participation form is attached. Reservations will be open to only Foundational- and Sponsor-level members until 15 April. Contributor members may apply after 15 April if any pods remain.

By reserving a pod within the OASIS KMIP pavilion, your company:

- 1. Understands that your participation is pending until approval is received from the RSA show organizers;
- 2. Agrees to comply with all the rules and requirements as outlined in the KMIP Formal Interop process as approved by the TC, and other applicable OASIS rules;
- 3. Acknowledges that full payment must be received within 30 days of the signed agreement and that no refunds are available after RSA approves your participation.

PARTICIPATION BENEFITS

Similar to previous years, all Participants will operate out of the OASIS booth, coordinated by OASIS staff. OASIS staff will work directly with the confirmed participants on booth logistics.

Each Participant will receive:

- An identical workstation that includes: *furniture, electricity, carpet, video monitor, and signage (logos)*
- Two booth staff registrations
- Company recognition in all Interop promotions, including:
 - OASIS press release (each Interop Participant will be highlighted, with quote opportunities for Foundational and Sponsor-level members)
 - Interop datasheet, featuring Participant logos and company descriptions
 - Websites presences (on both RSA and OASIS sites)
 - Booth signage
 - Email announcements, OASIS News articles, social media outreach, etc.
- Dedicated OASIS staff support to coordinate logistics and assist in planning
- Subscription to an exclusive email list to be used throughout the planning process
- The option to distribute a piece of company collateral material in the booth literature rack
- Complete list of all booth visitors with contact details (only if lead collection is confirmed by the group)

Please note: Internet connectivity is not included in the participation fee. If Internet is required, an additional fee will apply to all booth participants. Any questions regarding participation may be directed

KMIP Interop Demonstration RSA 2020 Participation Agreement

Reservations are open to Foundational- and Sponsor-level members until 15 April. Contributor members may apply after 15 April, if space is still available. To reserve your space, please complete and submit this form. Full payment is due within 30 days of the signup date.

| Main Contact: | | |
|-----------------------|-----------------|--|
| Company/Organization: | | |
| Mailing Address: | | |
| City: | State/Province: | |
| Country: | Postal Code: | |
| Phone Number: | E-mail: | |

Participation Fee = \$9,800

Approval & payment

By signing below, the individual executing this agreement represents and warrants that he/she is duly authorized to execute this binding contract on behalf of his/her company. The company agrees to pay the outlined participation fee within 30 days of the signup date, and agrees to comply with all the rules and requirements as outlined on the previous page. Reminder that no refunds are available after RSA approval is given.

| Authorizing Signature: | | Date: | |
|---------------------------------------------------------|------------------------------------|-------------------------------------|--------------------------------------|
| The undersigned has revi | ewed this agreement and confirms s | upport in the amount of: \$9 | ,800 |
| Please choose the form o | of payment: | | |
| []Check []Bank] | Transfer [] Credit Card, please c | ircle card type: AMEX | VISA MASTERCARD |
| If by credit card, provide otherwise noted in writir | - | hat credit card payments wi | ll be processed when received unless |
| Card number: | | Expiration date: | CSV Code: |
| Holder's Name: | ŀ | lolder's Signature: | |
| If by check, please make | check payable to OASIS: | | |
| 35 Corporate Drive, Suite Burlington, MA USA 018 | | | |

If by bank transfer, please contact <u>accounting@oasis-open.org</u> for more details.