

Citrix Certified Instructor Subscription Program Application

- Only confirmed Citrix Certified Instructors are eligible for the Subscription Program. Please review and complete the enclosed application and NDA agreement, and return a copy by fax, and a signed original copy to one of the following addresses:

<p>Citrix Systems, Inc 851 West Cypress Creek Road Fort Lauderdale, FL 33309</p> <p>Contact: Steve Pace Steve.pace@citrix.com Phone: 954-267-8408 Fax: 954-267-8421</p>	<p>Citrix Systems UK Ltd. Chalfont Park House, Chalfont Park Chalfont St. Peter Gerrards Cross Bucks, SL9 0DZ United Kingdom</p> <p>Contact: Mona Manani mona.manani@eu.citrix.com Tel: +44(0)1753 276303 Fax: +44 - (0)1753 276705</p>	<p>Citrix Systems Asia Pacific Pty Ltd. Asia/Pacific Headquarters Level 3, 1 Julius Avenue Riverside Corporate Park North Ryde, NSW 2113 Australia</p> <p>Contact: Toula Angelakos toula.angelakos@citrix.com.au Tel: +61 2 8870 0856 Fax: +61 2 8870 0600</p>	<p>Citrix Systems Japan Arco Tower 16F Tokyo, 153-0064 Japan</p> <p>Contact: Mitsuo Takshima mitsuo.takeshima@citrix.co.jp Tel: +81.3.5740.2893 Fax: +81.3.5434.0987</p>
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- Within five working days after the receipt of your fax, Citrix will send a welcome package that will include one Prometric discount voucher codes, and a special login to un-encrypt Instructor Manuals you will be able to download from MyCitrix.
- As part of the CCI subscription program, participants receive free access to ten eLearning classes. **Applicants must provide their Citrix eLearning username on this application to receive access to the free online classes.**

CCI Subscription Program Pricing

The cost of the CCI Subscription in 2005 is \$500USD. Applicants must pay the full amount upon acceptance into the program. This payment can be made via credit card or personal check. Payment information is to be included below with this application. If you have any questions on the pricing, please contact your local Citrix Education Sales representative

CCI Subscription Renewal

Starting in January 2005, Citrix will require all new CCI's to purchase the subscription package. To continue to act as a Citrix Certified Instructor, you must participate in the Subscription Program.

Citrix Subscription Program Application

Location Information – The following questions refer to the person applying for the subscription program.

1. Physical Address

CCI Name:

Address 1:

Address 2:

Address 3:

City:

State/Province:

Postal Code:

Country:

CALC you work for (N/A if you are independent CCI):

2. Billing Address

Same as Location's Physical Address (skip to next question)

Different from Location's Physical Address (enter information below)

Address 1:

Address 2:

Address 3:

City:

State/Province:

Postal Code:

Country:

3. Main Phone Number

Country Code (for non-U.S. only):

Area Code:

Phone Number:

4. Fax Number

Country Code (for non-U.S. only):

Area Code:

Phone Number:

5. Citrix E-Learning ID (username)

Business Information – The following questions refer to the company the CCI is employed by (if applicable).

6. Primary Line of Business

7. Secondary Lines of Business (select all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Independent Software Vendor | <input type="checkbox"/> Independent Hardware Vendor |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> System Integrator |
| <input type="checkbox"/> Network Service Provider | <input type="checkbox"/> Citrix OEM License |
| <input type="checkbox"/> Training Provider | <input type="checkbox"/> Application Service Provider |
| <input type="checkbox"/> Reseller | |

- | | | |
|---|--|---|
| <input type="checkbox"/> CSN – Platinum | <input type="checkbox"/> CSN – Gold | <input type="checkbox"/> CSN – Silver |
| <input type="checkbox"/> CBA – Premier+ | <input type="checkbox"/> CBA – Premier | <input type="checkbox"/> CBA – Consulting Partner |
| <input type="checkbox"/> CBA – Charter | <input type="checkbox"/> Training/CALC | <input type="checkbox"/> |
| <input type="checkbox"/> SI/Enterprise | <input type="checkbox"/> OEM/ICA License | |

9. Payment Information

- Credit Card
 Personal Check (please include when sending application)

10. Credit Card Information

Cardholder Name:

Card Type:

Card Number:

Expiration Date

11. Shirt Size (check one)

- S
 L
 XL

12. MyCitrix Login ID

CITRIX SYSTEMS, INC.
NONDISCLOSURE AGREEMENT

Effective Date: _____

In order to protect certain information considered to be confidential ("Confidential Information"), Citrix Systems, Inc., and its majority owned or controlled subsidiaries ("Citrix"), and the "Participant" identified below, agree that:

1. Disclosing Party. The party disclosing Confidential Information ("Discloser") is (check one):

- Citrix.
- Participant.
- Both Citrix and Participant.

2. Description of Confidential Information. The Confidential Information to be disclosed under this Agreement is:

(Note: Be specific; for example, individually list materials provided. If necessary, please attach additional sheets referencing this Agreement.)

3. Restrictions. The party receiving Confidential Information ("Recipient") shall maintain the Confidential Information in confidence and disclose the Confidential Information only to its employees, subcontractors and consultants who have a need to know such Confidential Information in order to fulfill the purpose described below. Recipient shall first have entered into a confidentiality agreement with such employees, subcontractors and consultants at least as restrictive as this Agreement. Recipient remains responsible for breaches of this Agreement arising from the acts of its employees, subcontractors and consultants. The Confidential Information is to be used only for the following purpose (check one):

- Joint marketing.
- Evaluation in anticipation of a business relationship between the parties.
- Developing or presenting a proposal.
- Modification of a party's product to enhance compatibility with the other party's product.
- Furthering the business relationship between the parties.
- Other _____

4. Confidentiality Period. Recipient's duty to protect Confidential Information expires three (3) years from the date of receipt of the Confidential Information.

5. Disclosure Period. This Agreement applies to Confidential Information that is disclosed between the Effective Date and two (2) years thereafter (the Agreement "Term").

6. Standard of Care. Recipient shall protect Confidential Information by using the same degree of care as Recipient uses to protect its own information of a like nature, but no less than a reasonable degree of care, to prevent the unauthorized use, disclosure, dissemination, or publication of the Confidential Information. User shall promptly return or certify destruction of all copies of Confidential Information upon request by the other party or upon the expiration or earlier termination of this Agreement.

7. Identification. Recipient's obligations only extend to Confidential Information that is described in Section 2, and that: (a) is marked as confidential at the time of disclosure; or, (b) is unmarked (e.g., disclosed orally or visually) but is identified as confidential at the time of disclosure.

8. Exclusions. This Agreement imposes no obligation upon Recipient with respect to Confidential Information that: (a) was rightfully in Recipient's possession before receipt from Discloser; (b) is or becomes a matter of public knowledge through no fault of Recipient; (c) is rightfully received by Recipient from a third party without a duty of confidentiality; (d) is disclosed by Discloser to a third party without a duty of confidentiality; (e) is independently developed by Recipient; or (f) is disclosed by Recipient with Discloser's prior written approval.

9. Required Disclosures. If the Recipient is confronted with legal action to disclose Confidential Information received under this Agreement, the Recipient shall promptly notify the Discloser, and reasonably assist the Discloser in obtaining a protective order requiring that any portion of the Confidential Information required to be disclosed be used only for the purpose for which a court issues an order, or for such other purposes as required by law.

10. Warranty. Discloser warrants that it has the right to make the disclosures under this Agreement. **NO OTHER WARRANTIES, INCLUDING WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE OR AGAINST INFRINGEMENT, ARE MADE BY EITHER PARTY UNDER THIS AGREEMENT. ANY INFORMATION EXCHANGED UNDER THIS AGREEMENT IS PROVIDED "AS IS."**

11. Intellectual Property Rights. Except as expressly set forth herein, no licenses under the intellectual property rights of either party are granted. Nothing in this Agreement shall be construed as granting a license under any patent or copyright.

12. Miscellaneous.

This Agreement imposes no obligation on either party to purchase, transfer or otherwise dispose of any technology, services or products.

This Agreement shall not restrict reassignment of Recipient's employees.

The parties agree to adhere to all applicable US Export Laws and Regulations and that absent any required prior authorization from the Office of Export Licensing, US Department of Commerce, they will not knowingly export or re-export, directly or indirectly, through their affiliates, licensees, or subsidiaries, any of the Confidential Information (or any product, process, or service resulting directly there from) to any country restricted by US law or governmental order.

This Agreement does not create any agency or partnership relationship.

This Agreement shall be construed according to the substantive laws of the State of Florida without regard to its conflicts of laws provisions.

Prior to the commencement of any legal proceeding under this Agreement, all claims must be raised for discussion between one officer of each company. Should the claims not be resolved within ten (10) days of such discussion, the party raising the claims shall be free to pursue its legal remedies.

This Agreement, including attachments, if any, embodies the entire understanding between the parties pertaining to the subject matter hereof. Any additions or modifications to this Agreement must be made in writing and must be signed by both parties.

CITRIX SYSTEMS, INC.
6400 NW 6th Way
Ft. Lauderdale, FL 33309

By _____

Title _____

PARTICIPANT

"PARTICIPANT" includes its majority owned or controlled subsidiaries.

"PARTICIPANT" includes only the entity identified above.

Other _____

By _____

Title _____