

2010 Canadian Seating & Mobility Conference
EXHIBITOR ORDER FORM
Social Tickets and Additional Lunch Tickets

COMPANY NAME: _____ **CONTACT PERSON:** _____

SOCIAL TICKETS:

We wish to purchase:

___ Wednesday Evening Social Event Tickets @ \$ 50.00 = _____

ADDITIONAL LUNCHEON TICKETS:

Each Exhibitor will receive 2 lunch tickets per booth per day to a maximum of 10 lunch tickets total per Exhibitor

___ Additional Wednesday Luncheon Tickets @ \$ 50.00 = _____

___ Additional Thursday Luncheon Tickets @ \$ 50.00 = _____

Amount = _____

Name: _____ Signature: _____ Date: _____

Return ASAP with payment to:

ADDRESS:

Canadian Seating & Mobility Conference
14 Waterbridge Court, Kitchener, Ontario, N2P 2A7
Ph: 519-208-0190 Fax: 519-208-0191

Faxed requests must include credit card payment. MasterCard and Visa Accepted.

Credit card Type and Number _____ Expiry Date _____

Name of Cardholder _____

REQUEST FORM FOR COMPLIMENTARY EXHIBIT HALL PASSES

To receive your complimentary Exhibit Hall passes, please indicate your interest by checking off the box below. Passes will be issued April 16, 2010.

Yes, we would like to receive our 20 complimentary Exhibit Hall Passes per 10 foot booth of exhibit space purchased.

Hall passes should be directed to the attention of: _____.