

1. EXHIBITOR INFORMATION PLEASE PRINT

Company Name: _____

Contact Name: _____

Address: _____

City: _____ Province / State: _____ Zip: _____ Country: _____

Phone: (_____) _____ Fax: (_____) _____

Email: _____ *Website: _____

Phone: (_____) _____ Fax: (_____) _____

Email: _____

Please indicate your contracted 2010 IECSC Las Vegas Booth Number(s): _____

2. CLASSROOM & FEES (CONTRACTED CLASSROOMS, DAYS AND TIMES BELOW)

Manufacturers are given right of first refusal—and are only guaranteed—the room(s)/date(s)/time(s) that they occupied in 2009 provided reinstatement takes place no later than August 15, 2009. After that date, rooms are assigned on a first come, first served, space available basis. We will do our best to accommodate your request, but availability is not guaranteed. If your request is accommodated, you will be notified by email. At that time, full instructions for submitting session details will be provided. You will be required to provide session details via online link. Speaker photo required in .jpg format only, min 300dpi. Other file formats or lower resolution .jpg files cannot be used. Furthermore, you agree to submit requested details no later than November 28, 2009, or forfeit the entitlement to have your session advertised in some or all promotional materials. See classroom pricing chart for applicable fees. Room assignments will NOT be made without appropriate deposit.

Classroom #1 Room #: _____ Day(s): _____ Time(s): _____ Total Classroom Cost: _____ USD

Classroom #2 Room #: _____ Day(s): _____ Time(s): _____ Total Classroom Cost: _____ USD

Classroom #3 Room #: _____ Day(s): _____ Time(s): _____ Total Classroom Cost: _____ USD

Classroom #4 Room #: _____ Day(s): _____ Time(s): _____ Total Classroom Cost: _____ USD

All classrooms will come with the following furnishings:

- One wired microphone
- Water service at head table
- Stage riser in rooms of 75 capacity or more
- Chairs set theatre style to maximum capacity
- Limited electrical (wall plugs only)
- One lectern/podium
- Head Table
- One skirted head table

All audio visual is the responsibility of exhibitor and may be ordered through the IECSC official audio visual contractor.

Show Management reserves the right to change classroom location at any time. Should such occasion arise, Show Management will offer comparable alternatives. Exhibitor agrees to submit session details in accordance with the instructions that are set forth by Show Management, otherwise forfeit the opportunity to have their session publicized in all attendee promotional vehicles. Questex Media will not be responsible for non-publishing of session details where exhibitor has failed to meet deadlines or provide materials in required formats.

Check # _____ Make Check Payable to IECSC Las Vegas Credit Card (check one): <input type="radio"/> American Express <input type="radio"/> Mastercard <input type="radio"/> VISA (Credit card charges will appear on your statement as IECSC) Card No: _____ Exp. Date: _____ Cardholder Name: _____ Signature: _____

PAYMENT SCHEDULE:

Upon Signing **50% Due** with application/contract

December 4, 2009 100% Due

Room assignments will NOT be made without appropriate deposit.

The fees set forth above reflect a 3% discount for payments made via cash, checks or bank wire transfers. Payments made using credit cards are not entitled to the cash, check and bank wire transfer discount and the applicable fees will be recalculated accordingly. If your balance of payment is not received by other means within 90-days of the event, this card will be billed automatically to settle your account.

3. SIGN HERE

Exhibitor has read the Terms & Conditions on the reverse side of this Agreement. Exhibitor understands that this Agreement shall be legally binding between Questex Media and the Exhibitor only upon acceptance in writing by Questex. Exhibitor also understands that any changes in the information in this Agreement must be provided to Questex Media in writing. This Agreement may be executed and delivered by facsimile and a facsimile signature shall be treated as an original.

Exhibitor's Authorized Signature: _____ Date: _____

Name (Please Print): _____ Title: _____

Show Management: _____ Title: _____

FOR OFFICE USE ONLY

Date Rec'd: _____

Total Price: _____

Payment Rec'd: _____

Balance Due: _____

Accepted By: _____

Classroom #1 Assigned

Classroom #2 Assigned

Classroom #3 Assigned

Classroom #4 Assigned

Please complete and mail white copy with payment:

Payable to: IECSC Las Vegas / Questex Media Group

Questex Media Group, Inc.
IECSC Las Vegas
757 Third Avenue, 5th Floor
New York, NY 10017

WIRE TRANSFERS:

For information on how to Wire Transfer payment, please contact Mary Barry at (617) 219.8347

QUESTIONS?

Please contact:
Tel: (203) 736.1699
Fax: (203) 736.1651
Email: info@iecsc.com
Web: www.iecsc.com

RETAIN YELLOW COPY FOR YOUR RECORDS.