



CANADIAN NATIONAL EXHIBITION
AUG 19 to SEPT 5 | 2016
LET'S GO TO THE EX!  THEEX.COM

**FOOD
BUILDING**

2016 - 2018 Expression of Interest Form

email: jmintz@theex.com
call: 416.263.3849

Exhibitor's Contact Information

COMPANY NAME: _____

CONTACT NAME: _____

2ND CONTACT: _____

2ND CONTACT #: _____

ADDRESS: _____

SUITE #: _____

EMAIL: _____

CITY: _____

PROVINCE/STATE: _____

POSTAL/ZIP: _____

PHONE: () _____

MOBILE: () _____

FAX: () _____

EMAIL: _____

WEBSITE: _____

Booth Name(s) & Location (list all locations you currently lease)

Interest to Renew

1	Booth Name: _____ Booth Size: _____ Booth Location: _____ Contact Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Change Concept
2	Booth Name: _____ Booth Size: _____ Booth Location: _____ Contact Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Change Concept
3	Booth Name: _____ Booth Size: _____ Booth Location: _____ Contact Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Change Concept
4	Booth Name: _____ Booth Size: _____ Booth Location: _____ Contact Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Change Concept
5	Booth Name: _____ Booth Size: _____ Booth Location: _____ Contact Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Change Concept

New Location Request

☐ Yes, I'm interested to be considered for a new location ☐ No, not interested

Booth Size Required: _____ (10x20, 20x30, 20x20 etc.)

☐ Exhaust Hood

☐ No Hood Required

☐ Preferred Seating

☐ Corner Location

☐ Inline Location

I / we have the authority to bind the business

Name (Please Print): _____ Date: _____

Signature: _____

DEADLINE TO SUBMIT: FRIDAY OCTOBER 16, 2015
Fax to: 416.263.3863 or Email to: jmintz@theex.com