



## PLEASE TAKE A MOMENT TO FILL OUT THE INFORMATION BELOW. THIS WILL HELP US BETTER ACCOMMODATE YOU DURING THE MOVE IN PERIOD.

Company Name:	Booth #:
Person Responsible for Set Up:	
Mobile(s):	Land Line:
What move in date would you like to request?	
Monday, August 17 <sup>th</sup> AM □ PM □ Tuesday, August 19 <sup>th</sup>	AM 🗆 PM 🗆
Wednesday, August 18 <sup>th</sup> AM ☐ PM ☐ *Thursday, August 20 <sup>th</sup>	
*No vehicles permitted in buildings on <u>Thu</u>	rsday, August 20 <sup>th</sup> , 2015
Please note best efforts will be made to accommodate guarantee the exact date a	•
2. What is your type of Booth Construction:	
Built by Show's Official Decorator GES	YES □ NO □
3. How long is the setup of your booth?	
PLEASE PROVIDE A BRIEF DESCRIPTION OF YOUR SET UP.	
I. What size vehicle will be used for delivery:0	Quantity:
Is your vehicle/trailer part of your booth display? YES $\square$ NO $\square$	
5. Have you read your EXHIBITOR HANDBOOK? YES \( \bigcap \text{NO} \) \( \bigcap \text{http://theex.com/footer/vendor-info/indoor-exhibitors/indoor-exhibitors/shopping-pavilions-information-kit}	
5. Have you sent in your mandatory Health & Safety Acknowledgement	Form? YES $\square$ NO $\square$
7. Have you sent in your mandatory Certificate of Insurance?	YES □ NO □
Please note: All exhibitors must have a proof of insurance prior to mo	ve in, without it – you will not be able to setup
Please return your completed form by June 20 <sup>th</sup> , 20 bholden@theex.com	
Questions: Please call Brenda Holder	n at 416.263.3848.

changes/exceptions.

It is your responsibility to confirm your assigned move in date(s) and time(s).

Your move in schedule will be mailed at the end of June/beginning of July. If we do not receive a completed questionnaire, a move in day and time will be assigned with no