

S Global Experience Specialists Booth Layout Form

RETURN TO: Global Experience Specialists, Inc. (GES) • 7000 Lindell Road, Las Vegas, NV 89118-4702 • Fax: 866.329.1437 or 702.263.1520 for international exhibitors Contact us Online: www.ges.com/chat Phone: 800.475.2098 or 702.515.5970 for international exhibitors

All orders are governed by the GES Payment Policy and GES Terms & Conditions of Contract as specified in this Exhibitor Services Manual.

ASHA Health Care & Business Institute 2014

Green Valley Ranch

Form Deadline Date: March 21, 2014

April 11 - 12, 2014									MANDATORY FORM*		
COMPANY NAME		EMAIL ADDRESS							BOOTH NUM		
SHOWSITE CONTACT	SHOWSITE CONTACT PHONE # DATE				DATE/TII	ME OF ARRIVAL	CONTACT'S HOTEL (OPTION				
A unique grid must be complet combine services onto a single					ensure p	roper pla	acement of	items in	your booth	. Please do not	
Display Cases - Form C Pegboard / Tackboard - Special Colored Drape Standard Exhibit Systel Pad and Carpet (if you Installation & Dismantlin To use this grid:	Q-1 - Form Q-1 - Form Q-1 ms (if exhibit si are not carpeti	ze is smal	ler than b	ooth size		Q-1					
Use bold lines to indicate the scale of theMark the adjacent boot	e grid (i.e. 1 sq h numbers or a	uare = 1 fo aisle numb	oot) or ind ers.								
Each square	feet square since my booth is feet wide by BOOTH (indicate adjacent booth or aisle number:						feet long.				
Indicate Adjacent Booth or										Indicate Adjacent Booth or	
Aisle Number:	FRONT O	FROOT	1 (indica	to adjace	ont hooth	or aisk	a number:			Aisle Number:	

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*This form must be returned to GES for your orders to be processed.