

S 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.

2014 Out & Equal Workplace Summit

Moscone Center West

Form Deadline Date: October 11, 2014

November 4 - 6, 2014							MANDATORY FORM*			
COMPANY NAME					EMAIL ADDRI	ESS				BOOTH NUMB
SHOWSITE CONTACT					SHOWSITE CONTACT PHONE #			DATE/TIME OF ARRIVAL CONT.		CONTACT'S HOTEL (OPTIONA
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☐ Electrical Forms (For N☐ Hanging Signs/Truss -☐ Display Cases - Form ☐ Pegboard / Tackboard ☐ Special Colored Drape ☐ Standard Exhibit Syste ☐ Pad and Carpet (if you ☐ Installation & Dismant! To use this grid: Use bold lines to indice Indicate the scale of the signs of the	Form H-2 A-1 - Form A-1 e - Form A-1 ems (if exhibit si are not carpeti ing - Form L-1 ate the outline one grid (i.e. 1 sq	ze is smalle ng your ent of your boot uare = 1 fo	er than b tire booth th. oot) or ind	ooth size) n) - Form (C-1		booth.			
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Indicate Adjacent Booth or										Indicate Adjacent Booth or Aisle Number:
Aisle Number:	FRONT O									Aisie Number:

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