

Attendee List Promotions

ISSA SHOW NORTH AMERICA 2018 October 30 - November 1, 2018 • Dallas, TX

Exhibiting Company: _____ Booth #: _____

Check if information is for: Exhibiting Company Third Party 3rd Party Company (if applicable): _____

Contact Name: _____ Address: _____

City: _____ State/Country: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Physical Mailing List Options	(ONLY available for requests in writing using this form)	List Price	Fees
<input type="checkbox"/> 2017 Attendees <i>Data does not include contact information for attendees in the EU.</i>		\$.30/ per name with \$350 minimum order	add \$20 \$20 shipping fee added for labels
<input type="checkbox"/> 2018 Pre-registered Attendees		Labels shipped to Exhibiting Company Choose your subsets on page 2	

Email List Options		List Price	Fees
<input type="checkbox"/> 2017 Attendees <i>Data does not include contact information for attendees in the EU.</i>		\$.30/ per name with \$350 minimum order	\$0
<input type="checkbox"/> 2018 Pre-registered Attendees		Choose your subsets on page 2	

NOTE: Exhibitors must go online to order email list options and email communications will be sent using Experient's online data portal. Exhibitors will not have direct access to the email addresses. All orders must be paid in full prior to fulfillment of order. Applicable tax for Dallas, TX is 8.25%. **ORDER ONLINE: <https://exhibitor.experientswap.com>**

Terms & Conditions

This email list service applies as a one-time use. This email list may not be used for questionnaires or surveys. You agree not to sell, give or otherwise provide this list to anyone with the exception of vendors whom you may hire to write, design, print or mail pre-show and/or post-show marketing materials. You must inform these vendors that they are also obligated not to sell, give or otherwise provide this list to others or to use the list for any purpose or to retain a copy of the list.

Please note: Contact Information is as provided by each show registrant; therefore, neither Experient nor Show Management is responsible for any mail that cannot be delivered and/or is returned. There are no refunds for any list rental orders.

All orders canceled prior to 30 days of the show or after processing will not be refunded.

Orders cannot be processed unless received with payment. Purchase Orders are not accepted.

Indicate Payment Method

Check (Orders cannot be processed unless received with payment.)

Visa MasterCard American Express DISCOVER

Signature: _____

Card #: _____ Exp: ____ / ____

By signing here you acknowledge Experient's Terms and Conditions (above).

For Assistance Contact

Michelle Willever

P: 888.266.6802

E: michelle.willever@experient-inc.com

Fax Credit Card Orders to:

301.694.3286

Attendee List Order Form

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Select from the following subsets:

2017 DEMOGRAPHICS

REGISTRATION CATEGORY 2017

- A Associate
- AM Associate Manufacturer
- AS Associate Services
- BSC Building Service Contractor
- D Distributor
- ISP In-House Service Provider
- RC Residential Cleaning Professional
- W Wholesaler

COUNTRY

- U.S.
- Canada
- Mexico
- All countries outside of North America

2018 DEMOGRAPHICS

REGISTRATION CATEGORY 2018

- A Associate
- AM Associate Manufacturer
- AS Associate Services
- BSC Building Service Contractor
- D Distributor
- ISP In-House Service Provider
- RC Residential Cleaning Professional
- W Wholesaler

COUNTRY

- U.S.
- Canada
- Mexico
- All Countries Outside of North America

ARE YOU A NEW ATTENDEE?

- Yes
- No

SELECT YOUR CUSTOMER MARKET BASE

Distributors & Wholesalers

- 01 Commercial
- 02 Education
- 03 Government
- 04 Healthcare
- 05 Hospitality/Public Venues
- 06 Industrial
- 07 Retail
- 08 Transportation
- 09 Construction
- 10 Automotive
- 11 Oil and Gas
- 99 No Response/Not Applicable

SELECT YOUR PRIMARY MARKET SEGMENT

Building Service Contractors

- 01 Commercial
- 02 Education
- 03 Government
- 04 Healthcare
- 05 Hospitality/Public Venues
- 06 Industrial
- 07 Retail
- 08 Transportation
- 09 Construction
- 10 Automotive
- 11 Oil and Gas
- 99 No Response/Not Applicable

SELECT YOUR FACILITY TYPE

In-House Service Provider

- 01 Commercial
- 02 Education
- 03 Government
- 04 Healthcare
- 05 Hospitality/Public Venues
- 06 Industrial
- 07 Retail
- 08 Transportation

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Select from the following subsets:

**SELECT THE TITLE THAT BEST
DESCRIBES YOUR ROLE**

- 01 Dir. Env. Services/Hskpg
- 02 Executive Dir./Vice President
- 03 Facility Manager
- 04 General Mgr/CEO/President
- 05 IT Mgr/Dr
- 06 Operations
- 07 Purchasing
- 08 Regulatory Mgr/Dir
- 09 Sales Mgr/Dir
- 10 Sr Manager Jansan Industry
- 11 Supervisor
- 12 Training Mgr/Dir
- 13 Sales Associate

**SELECT THE FOLLOWING PRODUCT CATEGORIES
THAT YOU WOULD BE INTERESTED IN
VIEWING AT THE SHOW**

- 01 Cleaning Agents
- 02 Cleaning Tools & Supplies
- 03 Equipment & Accessories
- 04 Facility Maintenance & Safety Supply
- 05 Floor & Carpet Care
- 06 Foodservice Disposables & Equipment
- 07 Odor Control Products
- 08 Office Products & Supplies
- 09 Paper Products & Dispensers
- 10 Pressure Washing Equipment & Accessories
- 11 Restroom Care & Service
- 12 Restoration Supplies & Equipment
- 13 Services/Technology
- 14 Skin Care & Personal Hygiene
- 15 Storage & Material Handling
- 16 Waste Containment & Disposal