

## 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.

## MANDATORY FORM\*

## **International Production & Processing Expo**

Georgia World Congress Center January 26 - 28, 2016 Form Deadline Date: January 5, 2016

| SHOWSITE CONTACT   |   | PANY NAME  |  |                      |                             |                  | EMAIL ADDRESS |          |                                     |                                       |  |  |
|--|---|--|--|----------------------|-----------------------------|------------------|---------------|----------|-------------------------------------|---------------------------------------|--|--|
| I .  | ECONTACT  |  |  |                      | SHOWSITE CONTACT PHONE #    |                  |               | DATE/TIM | ATE/TIME OF ARRIVAL CONTACT'S HOTEI |                                       |  |  |
| A unique grid must be comple combine services onto a singl   |   |  |  |                      | ensure pi                   | roper plac       | cement of     | items in | your booth                          | . Please do not                       |  |  |
| Hanging Signs/Truss - Display Cases - Form A Pegboard / Tackboard Special Colored Drape Standard Exhibit Systee Hardwall Exhibit Systee Pad and Carpet (if you Installation & Dismantli To use this grid: Use bold lines to indicate the scale of the Mark the adjacent book | A-1 - Form A-1 - Form A-1 ms (if exhibit size are not carpeting - Form L-1 ate the outline of e grid (i.e. 1 sq | ze is small<br>ng your er<br>of your boo<br>uare = 1 f<br>aisle numb | ler than be<br>ntire booth<br>oth.<br>oot) or incoers. | ooth size) n) - Form | - Form Z<br>C-1<br>dimensio | -1<br>ns of your |               | de hv    | fee                                 | et long.                              |  |  |
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| Indicate   |   |  |  |                      |                             |                  |               |          |                                     | Indicate                              |  |  |
| Adjacent Booth or Aisle Number:  |   |  |  |                      |                             |                  |               |          |                                     | Adjacent<br>Booth or<br>Aisle Number: |  |  |
|  |   |  |  |                      |                             |                  |               |          |                                     |                                       |  |  |

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



FRONT OF BOOTH (indicate adjacent booth or aisle number:\_