

## 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

<b>J</b> · · · · · · · · · · · · · · · · · · ·	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.

MANDATOR	١
FORM*	

		A4M, American Academy of Anti-Aging Medicine - Spring
I A4M		Diplomat Resort and Spa Hollywood
AMERICAN AMERICAN ACADEMY OF ANTI-AGING	•	May 7 - 9, 2015

Form Deadline Date: April 16, 2015

COMPANY NAME				-	EMAIL ADDR	ESS				BOOTH NUM
										2001111000
SHOWSITE CONTACT					SHOWSITE C	ONTACT PHO	NE#	DATE/TI	ME OF ARRIVAL	CONTACT'S HOTEL (OPTION
A unique grid must be comple combine services onto a singl					ensure pi	roper pla	cement c	of items in	your booth	n. Please do not
Display Cases - Form Call Pegboard / Tackboard Special Colored Drape Standard Exhibit Syste Pad and Carpet (if you Installation & Dismantli Pouse this grid:	- Form Q-1 - Form Q-1 ems (if exhibit si are not carpeti ing - Form L-1	ng your er	ntire booth			<b>ù-1</b>				
<ul> <li>Use bold lines to indicate</li> <li>Indicate the scale of the</li> <li>Mark the adjacent boo</li> </ul>	ne grid (i.e. 1 sq	uare = 1 f	oot) or inc	dicate the	dimensio	ns of your	booth.			
Each square				ce my b	ooth is		_ feet w	ide by_	fe	et long.
	BACK OF	воотн	(indicate	e adjacer	nt booth	or aisle r	number:		)	
Indicate Adjacent										Indicate Adjacent
Booth or Aisle Number:										Booth or Aisle Number:
										<del></del>
	FRONT O									

Order Directly Online: https://e.ges.com/052600104/esm

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