

Onsite Contact Form

DEADLINE: January 14, 2019

Company Name: _____ Booth # _____

1) SERVICE KIT RECEIVED ACKNOWLEDGEMENT

So we can be sure you received access to your Exhibitor Service Kit please complete and email this form to Show Management.

Contact: _____ Title: _____

Signature: _____ Date: _____

2) ON-SITE CONTACT PERSON

Please provide the name and contact information of the primary individual who will be staffing your booth on-site. This information will allow us to contact your booth representative after show hours **in the event of an emergency.** *This information will be kept confidential.*

On-site Contact Person: _____

Cell Phone #: _____ Work Number #: _____

Email: _____

Hotel Staying at Drug Delivery Partnerships: _____

Arrival: _____ Departure Date: _____

Please email this form to your Operations Coordinator

Francesca DeFrancesco at Francesca.DeFrancesco@knect365.com