



## 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.										
Midwest Podiatry Conference Hyatt Regency Chicago								Form Deadline Dat March 12, 20		
April 3 - 5, 2014								MAI	NDATORY FORM*	
COMPANY NAME				EMAIL ADDRE	SS				BOOTH NUME	
SHOWSITE CONTACT				SHOWSITE CO	ONTACT PHON	E#	DATE/TIM	IE OF ARRIVAL	CONTACT'S HOTEL (OPTION	
A unique grid must be cor combine services onto a s				to ensure pr	oper plac	ement of	items in	your booth	. Please do not	
Pegboard / Tackbo Special Colored Do Pad and Carpet (if Installation & Dism	rape - Form A-1 you are not carp		iire booth) - Fo	rm C-1						
Fo use this grid:  • Use bold lines to in  • Indicate the scale  • Mark the adjacent	of the grid (i.e. 1 booth numbers	square = 1 fo or aisle numbe	ot) or indicate ters.							
Each squ	•	_ feet square since my booth is fe  FBOOTH (indicate adjacent booth or aisle nun				de by feet long.				
Indicate Adjacent Booth or Aisle Number:									Indicate Adjacent Booth or Aisle Number:	

FRONT OF BOOTH (indicate adjacent booth or aisle number:

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

Order Directly Online: https://e.ges.com/071600065/esm