

## 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.

National Institute on Minority Health and Health Disparities Grantees' Conference			Form Deadline Date:	
Gaylord National Resort and Conver				November 10, 2014
December 1 - 3, 2014	nion conton		MAN	NDATORY FORM*
COMPANY NAME		EMAIL ADDRESS		BOOTH NUMBER
SHOWSITE CONTACT	•	SHOWSITE CONTACT PHONE #	DATE/TIME OF ARRIVAL	CONTACT'S HOTEL (OPTIONAL)
A unique grid must be completed for excombine services onto a single grid. P	<u> </u>	nsure proper placement o	f items in your booth.	. Please do not
	-1 nibit size is smaller than booth size) arpeting your entire booth) - Form C			
To use this grid:  Use bold lines to indicate the outline of the grid (i.e., Mark the adjacent booth number)	e. 1 square = 1 foot) or indicate the o	dimensions of your booth.		
Each square is	feet square since my be	ooth is feet wi	de by fee	t long.
BACI	K OF BOOTH (indicate adjacen	t booth or aisle number:	)	
Indicate				Indicate

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.

Adjacent

Booth or

Aisle Number:

083600196