

Signature

Booth Security Request

Event: SME Advanced Manufacturing CANADA 2016 Dates: November 01, 2016 to November 03, 2016

Contact Name:				Booth Number(s):			
Company N	Name:			Email:			
Address:				City/Prov:			
Postal/Zip Code:		Phone #:			Fax #:		
Signature:							
Please indi	cate the dates a	nd times security	will be required	:			
		te Hours From					
	Da			То			
THE RATE	E FOR BOOTH SE		UNIFORMED) - \$3 JBJECT TO CHAN			GUARD PLUS 13% HST.	
ease choos	se a method of p	payment: (Cheque	es payable to To	oronto Congres	ss Centre)		
Cheque	□ Visa	☐ MasterCard	☐ Amex	Total An	Total Amount to be Charged:		
ard Number:				Expiry:			
ard Issued	To:			'			

Return Application To: Attention: "Mike Russell" Fax: (416) 245-3046

Email: mrussell@torontocongresscentre.com