



BOOTH INCLUSION FORM

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torontoexhibitorservices@ges.com www.ges.com/ca

SHOW: Canadian Meetings & Events Expo	COMPLETE & RETURN FORM BY: JULY 20, 2026
EXHIBITOR INFORMATION	
COMPANY NAME: _____	BOOTH #: _____
CONTACT NAME: _____ EMAIL: _____	PHONE: _____
SIGNATURE: _____	DATE: _____

Exhibitors at the *Canadian Meetings & Events Expo* are provided with pre-selected booth items courtesy of Show Management.

Complete & return this form to GES no later than **July 20, 2026** via torontoexhibitorservices@ges.com to secure your Booth Carpet Colour. Exhibitors who do not return the form by July 20th will be provided with Grey booth carpet (no exceptions).



* Optional carpet colours after the July 20th deadline will be charged to the exhibitor.

***Please use the chart below to indicate the items required for your booth. No substitutions, please.**

	YES	NO								
Black drape back wall (8' high)	<input type="checkbox"/>	<input type="checkbox"/>								
Black drape side wall (3' high)	<input type="checkbox"/>	<input type="checkbox"/>								
One (1) - 4' long x 30" high black skirted table	<input type="checkbox"/>	<input type="checkbox"/>								
Two (2) - plastic contour chairs	<input type="checkbox"/>	<input type="checkbox"/>								
Booth carpet <i>(please indicate colour below)</i>	<input type="checkbox"/>	<input type="checkbox"/>								
<table style="display: inline-table; vertical-align: middle;"> <tr> <td>Black</td> <td>Blue</td> <td>Grey</td> <td>Red</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Black	Blue	Grey	Red	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Black	Blue	Grey	Red							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							

Want to update your look?

Contact the GES Exhibitor Services team to discuss options to customize your space.
torontoexhibitorservices@ges.com

