

Space Application Form

Trade Show Consulting, LLC
12 Barthel Court
Lutherville MD 21093
Phone: (410)-252-1322
Fax: (410)-252-8108

Fabtech Mexico 2010
www.fabtechmexico.com
May 11-13
Centro Banamex
Mexico City, Mexico



Company Name: _____

Primary Address: Street _____

City _____ State _____ Zip Code _____

Coordinator _____

Billing Address: Street _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____ E-Mail _____

Rate and Space Information

Booth Cost Total

\$32.00 per sq. ft.

\$30.00 per sq. ft for 800 sq. ft. or more

\$29.00 per sq. ft for raw space (Minimum of 800 sq. ft.)

(All booths are 10'x10' otherwise indicated and have a backdrop and side rails).

What size space do you want?

Depth _____ x Width _____ = _____ Sq. mts.

Booth Includes

- Carpeting
- Back and Side Walls
- Company Sign
- 110V Electric
- Listing in Show Directory
- Table with two chairs

Drayage/Material Handling Included

(Minimum of 200 sq. ft. or 18 sq. mtrs. required)

What Spaces do you prefer?

1. _____ 2. _____ 3. _____

List companies you DO NOT wish to be near.

1. _____ 2. _____ 3. _____

FABTECH Mexico makes every effort to accommodate your requests, but reserves the right to assign the best available space when your preferences are not available.

NOTE: A contract for the selected space will be sent to the above coordinator contact at the billing address, if different from primary address. **A 50% deposit for the selected space is due upon receipt of the invoice. The remaining balance is due by January 1, 2010.**

All payments are to be made in U.S. Dollars to:

FABTECH Mexico 2010

Mail to: Trade Show Consulting, LLC
12 Barthel Court
Lutherville, MD 20193

Space Application Forms to:

Mail: Trade Show Consulting, LLC
12 Barthel Court
Lutherville, MD 20193
Fax: (410)-252-8108
Email: chuck@tradeshowconsult.com

Exhibitor Authorized Signature _____ Title _____

Print or Type Name _____ Date _____

If paying with a Credit Card, please complete the following: American Express MasterCard Visa

Your Account Number _____

Credit Card Billing Address & Zip (if different from above) _____

Expiration Date _____ Amount \$ _____

Name of Cardholder (Please Print) _____

Signature of Cardholder _____