

**4th INTERNATIONAL CONFERENCE ON
ADVANCED COMPOSITE MATERIAL IN BRIDGES AND STRUCTURES
ACMBS-IV
July 20-23, 2004
<http://www.eng.ucalgary.ca/Civil/ACMBS-IV>
EXHIBITOR'S INFORMATION**

DATES: July 21, 22, 23, 2004

EXHIBIT LOCATION: The Westin Hotel
Grand Foyer
Calgary, Alberta

EXHIBIT HOURS: During breaks/lunch and after sessions
All booths are located in the immediate vicinity of the conference meeting rooms to provide excellent exposure

SET UP: July 21, 07:00 – 10:00 (before break)

DISMANTLE: July 23, 14:00 (after lunch)

	Before April 30, 2004	After April 30, 2004
BOOTH RATES:	One Booth \$1500 (\$1401.87 + \$98.13 GST)	\$1750 (\$1635.51 + \$114.49 GST)

A **special conference registration rate of \$500 CND** (before May 15, 2004) is also available to exhibitors and will include meals and proceedings. A registration form for the Conference is attached.

All booths are 8' x 10'

Includes:

- One 10' backdrop blue drape and support piping
- Draped 8' side wall x 4' high
- One 8' draped table
- Two side chairs
- One 1500 watt electrical outlet per booth (only if required)

Booths will be assigned on a first come basis by completed application. (limited space available)
Space will be booked by location compatibility at the discretion of the trade show secretariat.

ADDITIONAL We have contracted GES Canada (formerly Stampede Display) for show services
www.ges-canada.com
For extra equipment rental and a drayage order form contact:

GES Canada
3030, 2600 Portland St. S.E.
Calgary, AB T2G 4M6
Tel: (403) 243-2212
Fax: (403) 243-3868
Email: dvoth@gesexpo.com

**SHIPPING
&
CUSTOMS
BROKERS:**

The mode of shipment of exhibit material is the sole responsibility of the exhibitor.
Due to lack of storage space, shipments cannot be received by the Westin Hotel
Ship directly to GES Canada.
For the convenience of exhibitors who will be shipping goods or materials from within or outside Canada, arrangements have been made with:

Mendelssohn – Customs & Transportation Services
Suite 206, 2100 – 78 Aven N.E.
Calgary, AB T2E 6W6
Tel: (403) 291-5332 Fax: (403) 291-5305
Email rparker@livingstonintl.com website: www.mend.com

REGISTRATION: Please note that the enclosed **Exhibition Space Reservation Form** must be completed in order to be eligible. Please forward with payment to Conference Concepts as indicated.

ACCOMMODATION: Blocks of rooms have been reserved at the Westin Hotel at the following rates:

\$135.00 Traditional Single/Double occupancy

\$165.00 Deluxe Single/Double occupancy

Phone 403-266-1611 or 1-800-937-8461

LIABILITY

The Conference Committee and/or Conference Concepts, the employees thereof, or their representatives will not be responsible for the safety of exhibits against robbery, damage by fire, accident or other causes prior to, during or subsequent to the period covered by the exhibit contract. Exhibitors should provide their own insurance for equipment and displays.

Normal security will be provided.

CANCELLATIONS: Conference Concepts must be notified of any cancellations in writing prior to **May 31, 2004**. A 50% administration fee will be withheld. **No refunds will be issued after this date.**

ACMBS-IV 2004 EQUIPMENT AND TRADE SHOW

EXHIBITION SPACE RESERVATION FORM

(Please type or print clearly)

Name of Company _____

Address _____

_____ Postal Code _____

Phone _____ Fax _____ email _____

Please indicate the names of the representative(s) attending the booth.

Conference Registration Package: _____

Others: _____

Exhibit Fees (GST # 87250 8510)

Please refer to the enclosed prospectus for an itemization of what is included in the fee. Note that any special requirements must be arranged directly with GES Canada (formerly Stampede Display)

One booth	before April 30	\$1500 (\$ 1401.87 + \$98.13 GST)	
	after April 30	\$1750 (\$1635.51 + \$114.49 GST) =	\$ _____

Booth Preference : Booth locations will be assigned by the local organizing committee with prime locations being assigned according to the dates received by Conference Concepts.

Booth Requirements:

(for info only) Power required ☐ yes (bring own extensions/power bars) ☐ no

Table required ☐ yes ☐ no (display is free standing)

Product Summary (short summary for inclusion in program)

PAYMENT MUST ACCOMPANY THIS FORM

VISA ☐ Mastercard ☐ Company Cheque ☐ Intl Bankers Cheque ☐ (Payable to Conference Concepts)

Card Number _____ Expiry Date _____

Name of Cardholder _____

Signature of Cardholder _____

Return completed form to:

Margaret-Anne Stroh
Conference Concepts – event management inc.
#71, 5810 Patina Drive S.W.
Calgary, AB T3H 2Y6
Phone 403-295-3393 FAX: 403-275-3130
Email: mastroh@ucalgary.ca

(photocopy for your records)