

Fax: 604 277 1736 Tel: 604 277 1726
12340 Horseshoe Way
Richmond, B.C.
Canada V7A 4Z1

Show Name PACIFIC DENTAL CONFERENCE March 8 - 10, 2012

Show Dates PDC Exhibit Hall March 8 - 9, 2012

| | | |
|----------------------------------|-----------|--------------|
| Exhibitor Name: | Tel. #: | Booth Number |
| Billing Address: | Fax #: | |
| City/Prov/State/Zip/Postal Code: | Auth. by: | |

1 Outbound Shipping Instructions

Please complete this section if Levy will be supervising booth labour.

Exhibitor Outbound Shipping Instructions: At close of show, exhibitor freight will be shipped to the following address: *If your freight is being forwarded to another show, be sure to include the name of show and your booth number.*

| | |
|----------------------------------|----------|
| Company/Show: | Booth #: |
| Address: | |
| City/Prov/State/Postal Code/Zip: | |
| Attention: | |

▪ **Select Shipping Method:**

Select carrier ▶

Ship via carrier of **exhibitor's choice.**

| |
|------------------|
| Name of Carrier: |
|------------------|

Ship via **official show freight carrier.**

Select shipping method ▶

Ground

| |
|---|
| <input type="checkbox"/> Air Select Service Preferred |
|---|

Please note:

- If an exhibitor is using a carrier of his/her own choice (or not using the **official** show freight carrier), the exhibitor is responsible for arranging for carrier to pick up at close of show.
- Levy cannot guarantee pick up time for exhibitor appointed carriers. All shipments are moved out of the exhibit hall at Levy's discretion.

2 Billing Information

Please indicate billing information for carrier charges if different than above.

Bill Shipping Charges to (if different from above):

| | |
|---|-----------------------|
| Shipper (signature): | Shipper (print name): |
| Freight Charges Billed To (Company/Show): | |
| Address: | |
| City/Prov/State/Postal Code/Zip: | |
| Telephone: | Attention: |

Full payment must accompany order. PLEASE, NO TELEPHONE ORDERS.

Credit Card Authorization MUST be on file with Levy Show Service Inc. before any goods or services will be rendered regardless of your preferred method of payment. By utilizing this form, exhibitors acknowledge that they have read and agree to comply with the terms of the Limits of Liability statements contained herein.