



# CSAE 2015 Showcase

October 29, 2015

Calgary Telus Convention Centre, Exhibit Halls CDE

## EXHIBITOR BADGE ORDER FORM

Each 10' x 10' booth comes with two exhibitor badges. If you require additional badges, please complete the Additional Badge section. A maximum of two additional badges per 10' x 10' is permitted and a maximum of two people working in the booth at a time is allowed. You may rotate your staff to comply with this policy. Exhibitor badges must be worn to gain access to the trade show floor for move-in and move-out as well as during the show. **Business conference delegates (red badge) are not permitted to work in the booth during the show hours without an exhibitor (orange) badge!** Attendees reported "suitcasing" (soliciting business without proper exhibitor accreditation) will be escorted out of the show and will not be allowed to participate in future CSAE shows.

Form must be returned to [geeta@csae.com](mailto:geeta@csae.com) by **September 28, 2015**.

**Booth/Company Name:** \_\_\_\_\_

Badge #1: \_\_\_\_\_  
First Name Last Name Organization

Badge #2: \_\_\_\_\_  
First Name Last Name Organization

## ADDITIONAL BADGES

### Billing Information

**Name:** \_\_\_\_\_ **Organization:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E:mail:** \_\_\_\_\_

Additional Badges \_\_\_\_\_ x \$50 each = \_\_\_\_\_  
5% HST = \_\_\_\_\_  
Total = \_\_\_\_\_

### Method of Payment

- Cheque  MasterCard  
(payable to CSAE)  
 Visa  American Express

Card Number: \_\_\_\_\_ Expiry: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**Booth/Company Name:** \_\_\_\_\_

**Additional Badge #1:** \_\_\_\_\_  
First Name Last Name Organization

**Additional Badge #2:** \_\_\_\_\_  
First Name Last Name Organization

**LEGALITY:** CSAE will take photographs and some video at the CSAE 2015 National Conference & Showcase and utilize them in CSAE news or promotional material whether in print, electronic or other media, including the CSAE website. By participating in the CSAE 2015 Conference & Showcase, you grant CSAE the right to use the names and photograph of the above individuals for such purposes.

I agree and acknowledge that the above individuals are undertaking participation in CSAE events and activities as their own free and intentional act and they are fully aware that possible physical injury may occur to them as a result of their participation in these events. I give this acknowledgement freely and knowingly and that they are, as a result, able to participate in CSAE events and they do hereby assume full responsibility for their own well-being. I also agree not to allow any other individuals to participate in their place unless full registration transfer has been completed prior to the Conference start.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

