

# GULFCAN 2009 – SUPPLIER SIGN-UP SHEET

## Section 1: Attendance (Please Type or Print)

Company \_\_\_\_\_

Street Address/P.O. Box or Suite \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Primary Contact \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Fax ( ) \_\_\_\_\_ E-mail \_\_\_\_\_ Website www. \_\_\_\_\_

Attendees	Title	E-mail address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Section 2: Fee Schedule

Attendance to Conference \$1250  
Presentation \$1000  
Tabletop Exhibit \$1200 (tabletops are approximately 1m x 2m)  
Hotel Stay \$550 (includes Tuesday and Wednesday nights)  
\_\_\_\_\_ Full Package (attendance, table, presentation, hotel stay – save \$200) = \$3800 = \_\_\_\_\_

\_\_\_\_\_ Attendees (if purchasing a package, count only additional attendees.  
Hotel (not included) x \$1250 = \_\_\_\_\_

\_\_\_\_\_ Presentation – 30 minutes x \$1000 = \_\_\_\_\_

\_\_\_\_\_ Tabletop(s)(if purchasing a package, count only additional tabletops) x \$1200 = \_\_\_\_\_

\_\_\_\_\_ Hotel stays (covers Tuesday and Wednesday nights) x \$550 = \_\_\_\_\_

Please list attendees requiring rooms \_\_\_\_\_

**TOTAL DUE \$** \_\_\_\_\_

## Section 3: Payment Information

We will invoice you net-30 or you can pay by credit card:

Credit Card Information – **Visa/MasterCard**: Name on card \_\_\_\_\_

Card number \_\_\_\_\_

Expiration date \_\_\_\_\_

**Payment must be received by September 21 2009. Non-payment will result in non-admittance to Conference.**

Please supply the name of the person responsible for payment of above amount due \_\_\_\_\_

The undersigned understands the terms and conditions listed on this Contract. The undersigned hereby agrees to the terms and condition this contract, including the terms and conditions on the reverse side and the invoice.

Authorized signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Sign and email contact@worldcanconferences.com or fax to +1-773-880-2421**