



EXHIBITOR REGISTRATION FORM
Calgary - Nov 6th - 8th, 2016
Hyatt Regency Hotel

Company:	Website:	
Address:		
City:	Province:	Postal Code:
Name of Contact:	Email:	
Contact Phone:	Contact Cell:	

Display Booth Information: (Note: You are responsible for any insurance requirements.)
 Booth will be reserved in order of payment received (*Please see booth placement note below).
 Booth includes: one 12A outlet, one 6' table, two chairs, booth carpet & **one set of function tickets**.
 Extra cost for additional power, telephone, internet, exceptional material handling or other requirements.
Accommodations: Call Hyatt Regency Hotel to book special WABE rate. See www.wabe.ca for more details.

BOOTH WORKER INFORMATION: (Required for name badges.)

Name:		Name:	
City:		City:	
Name:		Name:	
City:		City:	

* **BOOTH PLACEMENT:** Please go to (www.wabe.ca) to view & pick your choice of placement on the exhibit floor.

1st Choice Booth Number(s):	
2nd Choice Booth Number(s):	

BOOTH NEEDS: Each booth is 80 sq. ft. (8 ft deep x 10 ft wide) (*each booth purchase includes one full set of function tickets.)

Early - On or before September 23, 2016	_____ X	\$1,100.00	_____
Regular - After September 23, 2016	_____ X	\$1,300.00	_____

ADDITIONAL FUNCTION TICKETS:

Full Set (Opening Party, (2) Lunches, (3) Breakfasts, Awards Evening)	_____ X	\$200.00 *	_____
* Remember, you will receive one free full set of tickets for each booth space you register. Order extras in this line.			
Sunday Lunch (Sunday noon)	_____ X	\$ 28.00	_____
Monday Lunch (Monday noon)	_____ X	\$ 28.00	_____
WABE Awards Evening (Monday evening)	_____ X	\$ 95.00	_____
Breakfast(s) <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday	_____ X	\$ 28.00 ea	_____

Sub Total: _____

GST #127793396 GST 5% of Sub Total: _____

TOTAL: _____

Visit our website at www.wabe.ca for more information.

RETURN FORM TO: Email: info@wabe.ca WABE, Suite 319 300, 8120 Beddington Blvd. NW Calgary, AB T3K 2A8 Phone: (403) 630-4907	Paid by: <input type="checkbox"/> Cheque <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Amex
	CARD #: _____
	EXPIRY DATE: _____
	SIGNATURE: _____
	MAKE CHEQUES PAYABLE TO: Western Association of Broadcast Engineers