



Company _____

Mailing Address _____

Contact Name _____

Phone _____ Cell _____

Email (required) _____

Products to be displayed _____

Include a picture or Facebook / Web page if you are a new exhibitor with Darwin Event Group _____

_____	<input type="checkbox"/>	BBBBBB
_____		BBBBBB
_____		BBBBBB
_____		BBBBBB

Do you require one (1) table included in both fee? Yes _____ No _____

Do you require chairs (2) included in booth fee? Yes _____ No _____

Sub-total _____

Plus 15% HST (No 873491807) \$ _____

Total \$ _____

Please make cheques payable to Darwin Event Group 50% non -refundable deposit due with registration.

Cheque / Visa / Mastercard \$ _____ Balance due \$ _____

I have read and agreed to the terms and conditions:

Agreement this _____ day of _____ (month) _____ year X _____ (authorized signature)

Use your Visa _____ Mastercard _____ Expiry Date _____

Card Number _____

Name _____

Signature of Card Holder _____