

COMPANY NAME \_\_\_\_\_ CONTACT \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ PROV \_\_\_\_\_ PC \_\_\_\_\_  
 PHONE (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
 EMAIL \_\_\_\_\_ WWW \_\_\_\_\_

**We wish to reserve the following space at the...3<sup>rd</sup> Annual Calgary Health Show  
 Upper Big Four, Stampede Park .... February 6 & 7, 2010**

Booth Choices	#	#	Size
	1 <sup>st</sup> choice	2 <sup>nd</sup> choice	____ x ____

Booth Cost \$ \_\_\_\_\_

Corner Premium (per Corner) \$ \_\_\_\_\_

GST#871149118RT - Plus 5 % GST \$ \_\_\_\_\_

**TOTAL COST** \$ \_\_\_\_\_

Add a 2% Surcharge  
for Visa/MC Transactions \$ \_\_\_\_\_

50% of Balance Due w/Application \$ \_\_\_\_\_

FINAL BALANCE DUE December 4, 2009 \$ \_\_\_\_\_

**SPACE RATES / BOOTH COST:**

10x10 (100sq') ...\$900.00... Corner Premium \$200.00

5x10 (50sq') ...\$500.00... Corner Premium \$100.00

**Body Worker\*** ...5 x10... (#1-12)...\$400.00

**Non-Profit Rates\*** ... 5x10 ...\$350.00

\*Full Payment Due at Time of Booking

**Book Before AUGUST 1<sup>st</sup> –  
 Carpet, Skirted Table, 2 Chairs Included.  
 After August 1<sup>st</sup> Cost is \$125.00**

*No booth sharing or sub-leasing of space without consent of Canwest. Retailing permitted – Commercial retailers must have a separate booth.*

**Cheques Payable to: CANWEST TRADE SHOWS**  
**2010 Broadview Rd NW, Calgary, Alberta. T2N 3H8**  
 Phone (403) 242-0859 Alt. (800) 626-1538  
**Fax (403) 246-3856**  
 Email office@canwesttradeshows.com  
 www.canwesttradeshows.com

**Please indicate if you are interested or participating in:**

- Sponsorship Opportunities
- Seminar Presentations
- Main Stage Presentations
- Door Prize Donation (\$50.00 or more)

**PAYMENT**

*Post-Dated Cheques Enclosed:*

**DEPOSIT:**

Chq. # \_\_\_\_\_ Amount \$ \_\_\_\_\_ Dated: \_\_\_\_\_

**FINAL:**

Chq. # \_\_\_\_\_ Amount \$ \_\_\_\_\_ Dated: \_\_\_\_\_

**Visa/MC**

Exp. \_\_\_\_\_

Card Holder \_\_\_\_\_

I hereby authorize CANWEST TRADE SHOWS INC. to process payments per the above schedule to my Visa/MC \_\_\_\_\_ (initial)

**INVOICE Request**

(please check here if you require an official invoice)

**WE PROPOSE TO EXHIBIT THE FOLLOWING ITEMS:** *(In the event that these items are not accepted, any monies paid shall be refunded)*

**NOTE: ONLY ITEMS THAT HAVE BEEN APPROVED AND ACCEPTED ARE ALLOWED. NO EXCEPTIONS.**

*Note: Applications Will Not Be Processed Unless All Monies Are Received.  
 All monies paid after acceptance of application are non-refundable.  
 Authorized signature here indicates acceptance of Terms & Conditions  
 on both sides of this document as set forth by Canwest Trade Shows.*

_____	_____
<b>AUTHORIZED EXHIBITOR SIGNATURE</b>	<b>DATE</b>
_____	
<b>PLEASE PRINT FULL NAME</b>	

**CANWEST USE ONLY:**

_____	_____
<b>Sales Rep</b>	<b>Accepted By Canwest Shows</b>
_____	
<b>BOOTH #:</b>	

*Although we will try to accommodate requests for preferred sites, final booth allocation is at the discretion of Show Management.*