



EXHIBITOR SECURITY REQUEST 2016

This form is your official invoice – please keep a copy for your records
All Orders Must Be Accompanied By Payment
All Prices Subject to Applicable Taxes
All Prices Subject to Change Without Notice

EVENT #: 29868

EVENT INFORMATION:

EVENT NAME: **CIM CONFERENCE & EXHIBITION 2016**

BOOTH NUMBER:

EVENT DATES: **MAY 1-3, 2016**

DATE(S) SECURITY REQUIRED: _____

(SPECIFY EACH DATE REQUIRED)

CUSTOMER INFORMATION:

COMPANY NAME: _____

COMPANY ADDRESS: _____

Street

City

Province/State

Postal/Zip Code

ON-SITE CONTACT NAME: _____

TELEPHONE #: () _____

E-MAIL: _____

FAX #: () _____

DISCOUNT RATE UP TO 7 DAYS PRIOR TO EVENT MOVE-IN DATE (4 hour minimum call time for all labour)

SHIFT TIMES	X RATE	X # OF DAYS	TOTAL
= _____ HOURS	\$28.00/Hr.		
= _____ HOURS			
= _____ HOURS			

ORDERS RECEIVED 48 HOURS & UNDER (NEW OR CHANGES, CANCELLATIONS NON-REFUNDABLE)

SHIFT TIMES	X RATE	X # OF DAYS	TOTAL
= _____ HOURS	\$49.00/Hr.		
= _____ HOURS			
= _____ HOURS			

ORDERS PRIOR TO 48 HOURS NOTICE FOR CANADIAN STATUTORY HOLIDAYS @ \$56.00 / HOUR
ORDERS 48 HOURS & UNDER NOTICE FOR CANADIAN STATUTORY HOLIDAYS @ \$98.00/ HOUR

SPECIAL INSTRUCTIONS:

PAYMENT INFORMATION:

Make Cheques Payable to:

**Vancouver Convention Centre
1055 Canada Place
Vancouver, BC Canada V6C 0C3**

To fax your form or for further inquiries:

Call (604) 647-7206

Fax (604) 647-7325

Discount Rate applicable up to 7 days
prior to event move-in date. Make all
payments in Canadian Funds. All orders
must be accompanied by payment.

SUB TOTAL

5.00% GST (#100432764)

**TOTAL
CANADIAN**

- ☐ Cash ☐ Cheque ☐ Money Order
☐ Visa ☐ MasterCard ☐ American Express ☐ Bank Wire Transfer (Please inquire for additional details)

Credit Card Number: _____ Expiry Date: _____

Print Name as it Appears on Card: _____

I hereby authorize the Vancouver Convention Centre or its agents to provide the service(s) described above and agree to assume complete responsibility for all charges for service.

Authorized Signature: _____

Print Name and Title of Authorized Representative