



# EXHIBITOR SECURITY REQUEST

(Effective January 1, 2007)

This form is your official invoice – please keep a copy for your records  
All Prices Subject to Applicable Taxes  
All Prices Subject to Change Without Notice

EVENT #: 22387

## EVENT INFORMATION:

EVENT NAME: **CANADIAN WASTE AND RECYCLING EXPO - 2007**

BOOTH NUMBER:

EVENT DATES: **NOVEMBER 28 – 29, 2007**

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 MOVE-IN

SHIFT TIMES	X RATE	X # OF DAYS	TOTAL
= _____ HOURS	\$23.25/Hr.		
= _____ HOURS			
= _____ HOURS			

### STANDARD RATE UNDER SEVEN DAYS TO MOVE-IN (MINIMUM 24 HOURS NOTICE REQUIRED)

SHIFT TIMES	X RATE	X # OF DAYS	TOTAL
= _____ HOURS	\$26.50/Hr.		
= _____ HOURS			
= _____ HOURS			

### ORDERS UNDER 24 HOURS NOTICE WILL BE CALCULATED @ \$28.50 / HOUR

## SPECIAL INSTRUCTIONS:

## PAYMENT INFORMATION:

Make Cheques Payable to:

**VCEC**  
**200 – 999 Canada Place**  
**Vancouver, BC Canada V6C 3C1**

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 move-in date. Make all payments  
in Canadian Funds. All orders must be  
accompanied by payment.

**SUB TOTAL**

**6% GST (#R100432764)**

**TOTAL  
CANADIAN**

☐ Cash ☐ Cheque ☐ Money Order  
☐ Visa ☐ MasterCard ☐ American Express ☐ Bank Wire Transfer# (Add \$10.00 Service Charge to total): \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Print Name as it Appears on Card: \_\_\_\_\_

I hereby authorize the VCEC 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