



**GROCERY  
SHOWCASE  
WEST**

Company Name: \_\_\_\_\_  
 Booth Number: \_\_\_\_\_  
 Square Feet: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Phone: \_\_\_\_\_

**Due March 30, 2012**

**ADDITIONAL EXHIBITOR BADGE FORM  
Grocery Showcase West 2012**

**PLEASE TYPE/PRINT CLEARLY:**

Please send invoice for Exhibitor Badges to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please invoice me for \_\_\_\_\_ additional exhibitor badges.

**Note: Upon receipt of this form your allotment will be updated online. Please allow 24-48 hours for us to update your profile online. You will then be able to go in and enter the additional names.**

Please complete for **ALL** booth employees only. Employees attending the conference and/or evening events will need to register for these separately. **Badges are NOT mailed, but picked up at the Exhibitor Registration Desk, located at the Entrance of the Vancouver Convention Centre.**

**\*ANTICIPATE LONG LINE-UPS ON SHOW DAYS BETWEEN 11:00 am - 12:00 pm\***

Exhibitor Badge Limit per Sq. Ft.	
Sq. Ft.	# of Badges
100	5
200	10
300	15
400	20

Additional Badge Costs Per Person Beyond Limit	
Pre-Show	On-Site
\$35.00 + HST included	\$45.00 + HST included

(HST # R105201024)

**PLEASE REMIT PAYMENT FOR ADDITIONAL EXHIBITOR BADGES BEYOND YOUR MAXIMUM**

PLEASE INVOICE  
 CHARGE TO: \_\_\_ VISA \_\_\_ MASTERCARD \_\_\_ AMEX

Name: \_\_\_\_\_  
 # \_\_\_\_\_  
 Expiry Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**Return by mail to:**  
 Grocery Showcase West  
 902-2235 Sheppard Avenue East, Willowdale, ON M2J 5B5  
**OR**  
**Fax to: 416.492.2347**