

Exhibit Application

APPLICATION MUST BE COMPLETED IN FULL BY THE EXHIBITOR

Payment Schedule:

A 50% non-refundable deposit must accompany application. Remaining balance is due 31 July 2021. If cancellation is received before 15 July 2021, only the non-refundable deposit will be retained by MS&T. Exhibitor cancelling after 15 July 2021 is liable for the total space rental fee.

Rental Rate:

10' x 10' In-line Booth — US\$3,050
Corner Booth Surcharge — US\$100

Booth Selection:

Please indicate booth choices in order of preference.

Booth Number(s)

1st Choice _____

2nd Choice _____

3rd Choice _____

Competitors:

Please list all companies that you DO NOT WANT to be located near. MS&T will make every effort to comply with this request.

The above 10' x 10' exhibit space rentals will include:

Draped 8' back wall and 3' side rails, 7" x 44" B&W ID sign, digital complimentary exposition passes, company and product listing in show directory, post-event attendee list (no emails are given), and one (1) full technical conference badge per paid 10' x 10' booth space rental. Exhibitor booth personnel badges are free and unlimited. Registration instructions will be included in the exhibitor manual.

matscitech.org

For more information, contact

Mona Thiel, ACerS
+1.614.794.5834
mthiel@ceramics.org

Stacy Varmecky, AIST
+1.724.814.3066
svarmecky@aist.org

Vicki Dean, AIST
+1.724.814.3018
vdean@aist.org

Doug Shymoniak, TMS
+1.724.814.3140
dshymoniak@tms.org

PLEASE PRINT CLEARLY

Official Company Name: _____

Company Name: _____

(Will appear as above on all pertinent exhibitor listings and floor plan)

Note: If "The" is the first word of the company name, we will alphabetize by the second word of the company name.

Street Address: _____

City: _____ State/Province: _____

ZIP/Postal Code: _____ Country: _____

Website: _____

Contact Person for All Correspondence and Service Manual:

Name: _____

Title: _____

Phone: _____

Fax: _____

Email: _____

Sales and Marketing Manager: _____

Exhibitor Authorized Signature: _____ Date: _____

Payment Information:

Check enclosed for US\$ _____ (check payable to MS&T, c/o AIST)

Charge my credit card US\$: _____    

Credit Card Number: _____

Exp. Date: _____

Name of Cardholder: _____

(Please print)

Signature: _____

Please mail payment to: MS&T 2021 c/o AIST Sales Dept.
186 Thorn Hill Road
Warrendale, PA 15086

Or fax this form with payment information to +1.724.814.3001

For Use by Exposition Management Only

This contract is accepted and assigned booth number _____, size _____ sq. ft.

Base Cost US\$ 3,050.00

Corner surcharge US\$ _____

Adjustments US\$ _____

Total cost US\$ _____

Deposit of US\$ _____

Accepted by _____

Date _____