

# 6th International Fire Sprinkler Conference, 28-29 March 2006

## RESERVATION REQUEST FOR EXHIBIT/STAND SPACE



**Estufa Fria** (adjacent to LeMeridien Park Atlantic Lisboa) **28-29 March 2006**

(Exhibition hours 28 March 6:00 p.m. to 9:30 p.m.)

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

Country \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

### Stand Information:

2m X 3m per stand

Number of stands requested: \_\_\_\_\_

€800.00 (first stand)

€700.00 (second stand)

One Exhibition-Only registration is included with each stand reserved.

Name of person(s) included with each stand reservation:

\_\_\_\_\_  
\_\_\_\_\_

### Floor Plan And Stand Availability Contact Information

Deborah Somers

Tel: +1 845/878-4200, ext 129

Fax: +1 845/878-4215

Email: Somers@nfsa.org

Please list other products/firms that you would prefer to be located near:

\_\_\_\_\_  
\_\_\_\_\_

Please list other products/firms that you would prefer NOT to be located near:

\_\_\_\_\_  
\_\_\_\_\_

Tell us about your display, what is included, etc.:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Event Program Advertising

Advertising rates (please check)

€300.00 Full Page (5-3/4" w X 8-1/4" h)

€185.00 Half Page (5-3/4" w X 4" h)

All ads will be one-color (black).

Please provide camera-ready copy (film, CD, or disk) not later than 15 February, 2006 to:

**David Vandeyar, NFSA**

**PO Box 1000 – 40 Jon Barrett Road**

**Patterson, NY 12563 USA**

**Telephone: +1 845/878-4200**

**Fax: +1 845/878-4215**

**E-mail: Vandeyar@nfsa.org**

### Terms Of Payment

Payment in full is due at time of reservation. Preferred method of payment is credit card. Please call +1 845/878-4200, ext 129 for information regarding alternative methods such as wire transfer or company check.

#### Credit Card Institution:

VISA     MasterCard     American Express

Credit Card #: \_\_\_\_\_

\_\_\_\_\_

Expiration Date: \_\_\_\_\_

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

Cardholder Signature: \_\_\_\_\_

Address/Phone of Cardholder if different than above:

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