

EXHIBITOR BADGE ORDER FORM

CLEAN CANADA 2012

APRIL 13 – 15, 2012

Toronto Congress Centre



Please complete and return this form by March 6, 2012. While it is essential that we receive this information as soon as possible please send only when certain of staff members' names scheduled to attend the Show.

Mail or Fax to: 30 Village Centre Place, Mississauga, ON L4Z 1V9 or Fax: (905) 361-2679

Company Name: _____ Code: _____
Address: _____
City / Prov / State: _____
Postal/Zip Code: _____
Contact Name: _____
Telephone: _____

Booth(s) Number: _____

Please list the names of all booth personnel. Booth personnel **MUST** be 16 years of age or older. There is a limit of 10 badges Per 100 square feet. This will be strictly enforced by Show Management. Badges will be prepared in advance from the list you provide to us and will be help for pickup at the Exhibitor's Registration Desk on Site. Please print clearly on the order form.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____



APPLICATION FOR TEMPORARY TELEPHONE SERVICE

****Application must be received by Bell Canada Tradeshow Desk minimum 5 business days prior to requested date .
An accelerated due date can be requested with a additional charge of \$200**

Event Name: _____
Service Address: **1020 Martingrove Rd, Toronto, ON M9W4W1 (North Building)** _____
Room Name/Booth Number: _____
Date Required for Installation (will be completed by 5 p.m. Mon-Fri): _____
Date Required for Disconnection (will be completed by 8 a.m.) _____
(On-site) Contact the day of Installation: Name _____
Number _____
Who do we contact regarding Details of this Application? _____
Tel: _____ Fax: _____ Email: _____

BILLING INFORMATION:

Company Name: _____ Attention: _____ Tel: _____
Billing Address: _____
City: _____ Prov/State: _____ Postal/Zip Code: _____

Effective Jan 22nd 2007 if an advance facility check is required prior to installation there will be an \$120.00 charge .
*****SERVICE OPTIONS (all service is billed a minimum 1 month; telephone line & DSL are billed separately)*****

OPTION A – Basic Line (no features included)
• \$55.06- \$75.26 line/month (exact rates depend on area) How many lines required "Input # of Lines" _____
• Installation charges are \$226.00/line (includes jack)

OPTION B - Internet
• All Requests for Internet Must be booked Directly by the Toronto Congress Centre (AVW Tel AV @ 416-240-7838)

***Do you require any additional features?**
Voicemail "Yes / No" Line Hunting "Yes / No" Call Waiting "Yes / No" Call Forward "Yes / No"
***Do you require a long distance savings plan?** "Yes / No" (\$9.95/mnth and 6 cents/per minute – North America)
***Do you require long distance block on the lines?** "Yes / No" (\$5.00 per line/per month)
***Do you require 900/976 block on the lines?** "Yes / No"

For ISDN service please contact 1-888-999-4736. For T1 service please contact 1-888-875-1843
For conferencing solutions contact Ash Nagre at 1-866-930-2525 x 8018
Rates quoted today are subject to applicable taxes & subject to change without notice
*****Please note that numbers assigned are not guaranteed prior to installation*****

Please return completed form to: Bell Canada (please ensure all fields on form are filled out)
Email: tradeshow@bell.ca Fax: 1-866-350-6606 Voice Mail: 1-800-414-8424
****Please note- by returning the completed form you are accepting the terms of this application and it is binding****
****REQUESTS ARE PRIORITIZED BY EVENT DUE DATE. ORDER CONFIRMATION WILL BE SENT BY FAX/EMAIL APPROXIMATELY ONE WEEK PRIOR TO EVENT****

Confidential Business Credit Form – 515

Note: ALL applicable fields on this form must be filled out.

A credit deposit may be required during the account initiation process as a prerequisite for activation.

Billing Telephone: _____	Billing Address: _____
Company Name: _____	_____
Type of Business: _____	
Date Established: _____	Other Business Tel #: _____
Bank Name: _____	Branch Location: _____
If property leased, name and contact # of owner: _____	

Legal Status: Choose 1 of the 3 categories below

Sole Owner
Name of Owner _____ Res Tel # _____ - _____ - _____
Two Pieces of Identification (i.e.: Driver's License, SIN#, Credit Card - **Health Card not accepted**)
1. _____
2. _____
Contact Name _____ Tel # _____ - _____ - _____
Estimated Long Distance /Month \$ _____
E-mail address _____
Cell phone number _____

Partnership
1. Name of Partner _____ Res Tel # _____ - _____ - _____
2. Name of Partner _____ Res Tel # _____ - _____ - _____
Two Pieces of Identification of each partner (i.e.: Driver's License, SIN#, Credit Card - **Health Card not accepted**)
1. _____ 1. _____
2. _____ 2. _____
Contact Name _____ Tel # _____ - _____ - _____
Estimated Long Distance /Month \$ _____
E-mail address _____
Cell phone number _____

Limited Company
Name of 1st Officer _____ Res Tel # _____ - _____ - _____
Name of 2nd Officer _____ Res Tel # _____ - _____ - _____
Charter or Incorporated number AND Date of incorporation: _____
Contact Name _____ Tel # _____ - _____ - _____
Estimated Long Distance /Month \$ _____
E-mail address _____
Cell phone number _____

Association
Please choose one of the above, as an Association can be registered as Sole, Partnership or Limited Company.

**Once completed return via fax to 866-350-6606 or via email to tradeshow@bell.ca
PLEASE SIGN AND FAX/EMAIL BACK FOR THE TRADESHOW APPLICATION TO BE
COMPLETED**



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FIRE SAFETY REPLY



A copy of the Fire Regulations for exhibitors is provided in this manual. Please review the regulations to ensure that your exhibit meets the requirements. In some instances, aspects of your booth **MUST BE APPROVED IN ADVANCE** by Show Management and The Toronto Fire Department.

	Yes	No
*1) Exhibit Configuration is 1,000 sq. ft. or more	-----	-----
*2) Exhibit has roof/mezzanine/second story	-----	-----
*3) Exhibit has a raised platform	-----	-----
*4) Exhibit exceeds 12 feet in height	-----	-----
5) Exhibit Material exceeds 10,000 lbs. Gross Weight	-----	-----
6) Exhibit Material exceeds 300lbs/sq. ft. limited	-----	-----
7) Exhibit has prohibited material	-----	-----
8) Materials/processes/equipment requires special permit	-----	-----
9) Exhibit has suspended signs/banners/lights	-----	-----
10) Exhibit has hard wall (in-line booths N/A)	-----	-----
11) Exhibit has motorized vehicle/combustion engine	-----	-----
12) Exhibit contains cooking appliances	-----	-----
13) Exhibit contains liquid fuels/natural gas/propane (6 weeks notice to process request)	-----	-----
14) Exhibit contains hazardous materials which do not comply with Government regulations on material handling in the work place	-----	-----

NOTE:

- *a) If any of questions 1 to 4 are answered Yes, specific booth plans must be submitted.
- *b) If any of questions 5 to 14 are Yes, specific details must be included.

Details:

Please return the completed form and appropriate certificates by March 6th to:

Clean Canada 2012
 30 Village Centre Place
 Mississauga, ON L4Z 1V9
 Attention: Dianne Franchino

Tel: 905-361-5238
 Fax: 905-361-2679

Exhibitor/Company Name: _____

Contact Person: _____ Booth # _____

Address: _____

City: _____ Postal Code: _____

Telephone # : _____ Fax #: _____



EXHIBITOR HANGING SIGN/BANNER FORM CLEAN CANADA 2012

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If you are planning to hang a sign or banner over your exhibit area please fill out this Hanging Sign/Banner Form and return it via mail or fax to our office. Once we have received your form we will evaluate your request and make every effort to incorporate your sign/banner into our plan for the 2012 show. This plan will enable us to avoid signs/banners conflicting with one another as well as to provide maximum exposure for all exhibitors & sponsors. Failure to complete this form may result in permission to hang a banner/sign being denied.

Mail or Fax to: 30 Village Centre Place, Mississauga, ON L4Z 1V9 or Fax: (905) 361-2679 by March 6, 2012

Company Name: _____ Code: _____

Address: _____

City / Prov / State: _____

Postal/Zip Code: _____

Contact Name: _____

Telephone: _____ Fax: _____

SIGN/BANNER INFORMATION

NOTE: Your sign/banner must not exceed 20' in length or 4' in width.

Booth # : _____

Sign/Banner # 1 Length: _____ Sign/Banner # 1 Width: _____

Sign/Banner # 2 Length: _____ Sign/Banner # 2 Width: _____

Sign/Banner # 3 Length: _____ Sign/Banner # 3 Width: _____

Show Management Approval: _____



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EXHIBITOR INSURANCE FORM

Exhibitors **MUST** provide proof of current and in force Commercial General Liability Insurance Coverage prior to participation in Clean Canada 2012 at the Toronto Congress Centre. Please complete and return whether you have Commercial General Liability Insurance coverage or require coverage for the event.

Please check one:

_____ Yes, we declare that there is Commercial General Liability Insurance in force, with a limit of \$2,000,000 (minimum) that recognizes and will respond on my/our behalf for all activities at the show.

Insurance Company Name: (not broker) _____

Policy Number : _____

Limit of Coverage: _____

Expiry Date of Policy: _____

OR

_____ No, we currently do not have coverage and will require Commercial General Liability Insurance at the show. Coverage will be obtained and information provided for CLEAN CANADA 2012.

Booth(s) Number: _____

Company: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Telephone: _____ Fax: _____

Contact: _____ Signature: _____

Note: Canfinse Insurance is the Official Insurer of Clean Canada 2012. You can contact them at 905-695-2971 or see enclosed form.