

2010 NEW PRODUCT SHOWCASE APPLICATION
April 25th & 26th Vancouver Convention Centre



PAYMENT MUST BE RECEIVED PRIOR TO SHOW

COMPANY INFORMATION

Company _____
 Contact _____ Title _____
 Address _____
 City _____ Prov _____ Zip _____
 Phone _____ ext: _____ Fax _____
 E-mail _____ **Signature** _____

You must be an exhibitor to purchase a place in the New Product Showcase. Companies must adhere to all Rules and Regulations as set forth in this contract.

GENERAL INFORMATION

The NPS display will sit in a high traffic area outside the Trade Show Entrance. Product must fit in a 1' x 1' area. Additional deliverables as follows: Each exhibitor will have their listings highlighted in the Show Guide if submitted prior to March 1st, 2010. Each booth will be highlighted on the main floor plan located in the lobby.

Policies & Procedures:

- All submitted items must be 'NEW' and launched after GSW 2009. New packaging does not constitute a new product and is therefore not eligible. Any products that do not adhere to this rule will be removed and refunds will not be given.
- Exhibitor is responsible for all costs associated with shipping your materials to the show site. If you are showcasing a small item, be sure to provide a display stand.
- Staged product comes with a 2"x3" announcement sign that will list your company name and booth number.
- You may submit a photograph of your product if you choose not to submit the product itself.
- Contracts will be accepted on a first come, first served basis. Placements in the showcase will be made alphabetically.
- Products in the showcase must be related to the grocery industry. Any products not related will be removed and refunds will not be given.
- Participating companies may be listed in CFGI publications prior to Grocery Showcase West 2010.

In order to generate increased attendee traffic flow, CFGI and Grocery Showcase West reserves the right to promote the New Product Showcase in its marketing and advertising materials. There is no guarantee in the use of any particular company name or item, in part or in whole, and recognition will be solely for the benefit of Grocery Showcase West.

Payment Information

Please Invoice Me	Please Charge My Credit Card:	Visa	M/C	Other
Single Place	_____ x \$150.00 (each)			
One Shelf	_____ x \$300.00 per shelf			
Full Unit	_____ x \$750 per unit			
			\$ _____	TOTAL DUE
Credit Card Number _____		Expiry Date _____ / _____ / _____		
Cardholder's Name _____		Authorization Signature: _____		

Fax form to 416.492.2347

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