

## **EXHIBITOR REQUEST FORM Meeting Rooms / Hospitality Suites**

To obtain approval for:

Keep a copy for your records.

Hospitality Suites at Hotels
Meeting Rooms at Hotels/Convention Centers
Literature Distribution at Hotel

(REQUIRES SHOW MANAGEMENT APPROVAL)

Deadline: First-come, First-served Questions? Contact Lynda Kisell

Email: lkisell@sme.org Call: 313-425-3106

	Complete this form and return	to lkisell@sm	e.org
Company:			Booth #:
Contact Name:			
Address:			
City / State / Zip: _		Email: _	
Country:			
REQUEST: Check	κ all that apply:		
MEETING	ROOM / HOSPITALITY SUITE		
Preferred L	_ocation (check one):	tion Center	
If hotel, pre	eferred hotel:		
Dates/Time	es required:		
	Other:		# of People:
Purpose fo	or meeting(s):		
LITERATU	JRE DISTRIBUTION AT A HOTEL		
Description of literature:			
Distribution	n Location:		
Marketed exhibitor t	e during show hours is strictly for internal company functions for groups of invited guests during show I lanagement and is subject to on-site review for	hours is strictly pro	hibited. Your room is provided by
<ul> <li>Obtain an Insurar</li> <li>\$1,000,000 PER</li> <li>1. So</li> <li>2. Fa</li> <li>3. Am</li> <li>4. Pre</li> </ul>	SPECIAL NOTE: ONCE A REQUEST IS AI ary arrangements with the facility directly for room setu- nce Rider naming All Five Associations as additional INCIDENT aciety of Manufacturing Engineers (SME) bricators & Manufacturers Association, International ( merican Welding Society (AWS) ecision Metalforming Association (PMA) memical Coaters Association (CCAI)	up, catering and aud al insured(s) for this	iovisual equipment needed.
	APPROVAL - FOR FABI	TECH USE C	NLY
	any above is an exhibitor and may book a meeting tor is to make his/her own arrangements.		
SHOW MANAGER	· ·		