

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

Company:		Booth #:
Contact Name:	Phone:	
Address:	Fax:	
ity / State / Zip:	Email:	
Country:		
EQUEST: Check all that apply	:	
MEETING ROOM / HOS	PITALITY SUITE	
Preferred Location (chec	k one): Hotel Convention Center	
If hotel, preferred hotel:		
Dates/Times required:		
Room setup (please che	ck): Classroom U-Shape Theater Other:	# of People:
Purpose for meeting(s):		
LITERATURE DISTRIB	JTION AT A HOTEL	
Description of literature:		
Distribution Location:		
arketed exhibitor functions for gi	hours is strictly for internal company functions and is a oups of invited guests during show hours is strictly pro and is subject to on-site review for adherence to an	ohibited. Your room is provided by
Make all necessary arrangement Obtain an Insurance Rider nami \$1,000,000 PER INCIDENT 1. Society of Manufa 2. Fabricators & Manufa 3. American Welding 4. Precision Metalfor	IAL NOTE: ONCE A REQUEST IS APPROVED, EXHIBS with the facility directly for room setup, catering and auting All Five Associations as additional insured(s) for this cturing Engineers (SME) surfacturers Association, International (FMA) Society (AWS) ming Association (PMA) Association (CCAI)	diovisual equipment needed.
Chemical Coaters		
	APPROVAL - FOR FABTECH USE (ONI ∨