



Virtual Booth Order Form



1. Fax this completed form to **952.894.8252**
2. You will know that it is live when the "**more info**" button appears next to your company name on the exhibitor list.
3. Virtual Booths remain on the website for no less than 60 days following the event.

Virtual Booth includes:

- ❖ **BOLDED** company name & booth number listed in the Exhibitor List with a "**more info**" button linking to your web page that features:
 - Your company **LOGO**
 - Your company Program Name followed by a 50 word description
 - Your company Booth Number
 - An expanded description (from 1 to 3 paragraphs)
 - New product/service announcement with **PHOTO**
 - A link to **your company website**
 - A list of 5 "Search Categories"
 - A list of up to 5 manufacturers you wish to promote
 - Contact information that can include address, phone, fax and email
 - An **ITINERARY** button that allows attendees to add your company to their event itinerary list
- ❖ Posting of **your press releases**
- ❖ New product info added to a special "**New Products**" page



Select Expo	Financial Summary						
<input type="checkbox"/> Damage Prevention Conference & Expo '08	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Virtual Booth</td> <td style="text-align: right;">\$ 250</td> </tr> <tr> <td><input type="checkbox"/> Video Option - \$250 additional</td> <td style="text-align: right;">\$</td> </tr> <tr> <td colspan="2" style="text-align: right;">TOTAL \$</td> </tr> </table> <p style="text-align: center;">(must be paid in full before activation)</p>	Virtual Booth	\$ 250	<input type="checkbox"/> Video Option - \$250 additional	\$	TOTAL \$	
Virtual Booth	\$ 250						
<input type="checkbox"/> Video Option - \$250 additional	\$						
TOTAL \$							
Applicant Information	Payment Method						
(Please Print or Type All Information)	<input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMEX <input type="checkbox"/> Check (Payable to: Cygnus Expositions)						
Company _____ Contact _____ Date _____ Phone _____ Ext. _____ Email _____ Authorized Signature _____	Credit Card # _____ Exp. Date: _____ Name On Card _____ Billing Address _____ _____ Signature _____						
For Internal Office Use Only	Fax Credit Card Payments to: 952.894.8252 Mail Checks to: Cygnus Expositions – MN Box 684080, Milwaukee, WI 53268-4080						
Check # _____ Amount _____ Invoice # _____ Payment Date _____ Accepted by: Cygnus Expositions Date Accepted _____ Acceptance Signature _____							

Interested in other web presence opportunities? Call your account representative for all the details! 800.827.8009