

OFFICIAL EXHIBITOR HOUSING FORM DEADLINE: FEBRUARY 21, 2011

March 22-26, 2011 | Las Vegas Convention Center | Las Vegas, USA



Online:
www.conexpoconagg.com
or www.ifpe.com



Fax:
+1 800-521-6017
or 847-996-5401



Mail:
CONEXPO-CON/AGG & IFPE 2011
Housing HQ c/o Experient
568 Atrium Dr
Vernon Hills, IL 60061-1731



Phone
+1 800-424-5247
or 847-996-5878

Hotel reservation requests will only be processed with a completed registration to attend CONEXPO-CON-AGG & IFPE 2011.

1 PERSONAL INFORMATION

First Name	Last Name	Title
Company/Organization		
Mailing Address		City
State/Province	Zip/Postal Code	Country
Telephone	Fax	E-mail (required for automated e-mail confirmation)

2 HOTEL SELECTION Hotel information and pricing can be found on the show website at www.conexpoconagg.com or www.ifpe.com. Please choose from the listed hotels. This request will not be processed without three hotel choices indicated. In the event that your hotel choice is not available, the best comparable hotel will be selected for you based on your current selections. *Hotel Tax is 12% (subject to change without notice).*

Arrival Date: ____/____/2011

Departure Date: ____/____/2011

Hotel—1st Choice

Hotel—2nd Choice

Hotel—3rd Choice

Select type of room desired and indicate name(s) of room occupants:

- Single/1 person
- Double/2 people
- Triple/3 people
- Quad/4 people

Special Requests:

- Double/Double
- King Bed
- Two Beds
- Non-Smoking

1. First Name Last Name

2. First Name Last Name

3. First Name Last Name

4. First Name Last Name

Please indicate if you have any special needs: _____

3 GUARANTEE INFORMATION

ROOM BLOCK GUARANTEE

- Check Enclosed (Checks must be submitted with this form to the address above for the amount equal to one night's room charge plus 12% tax)
- American Express | MasterCard | VISA A valid credit card with expiration date of 4/2011 or later is required to guarantee the room block.

Credit Card Number _____

Expiration Date: Month/Year _____

Cardholder Name as it appears on card. _____

Cardholder Signature _____

HOTEL DEPOSIT POLICY

Show Management requires each room reservation to be guaranteed for payment with either a credit card or deposit equal to one night's room charge plus tax. At their discretion, Hotels may charge credit card(s) provided to guarantee a deposit in the amount of first night's room charge plus tax on or after March 1, 2011.

CANCELLATION POLICY FOR HOTEL DEPOSITS

Reservation cancellation policies vary by hotel. The cancellation deadline will be clearly listed on your reservation confirmation.

QUESTIONS?

If you have questions or require additional assistance, please contact our Customer Service Team from 8am – 5pm CST at +1 800-424-5247 or 1 847-996-5878 or email Showmgmt-exh@experient-inc.com