CMS Winter Meeting 2002
Ottawa Marriott Hotel, *Victoria Gallery* 100 Kent St. Ottawa (Ontario)
Exhibit Programme – December 8-9
CONTRACT FOR EXHIBIT SPACE

Complete form and retain a copy for your files; send original with payment to: Canadian Mathematical Society, 577 King Edward, POB 450, Station A, Ottawa, ON CANADA K1N 6N5.   FAX: (613) 565-1539 (for credit card payments only)

The undersigned agrees to abide by all requirements mentioned in the RULES FOR EXHIBITING.

Company Name (will appear on Booth Sign):
Mailing address:
Telephone: FAX:
Name of authorized person: Title:
Authorized signature: Date

EXHIBIT BOOTHS

Names of Company Representatives **(please also tell us of any food allergies)**	1		
	2		

Please indicate preferred and alternate booth locations. Exhibit space is assigned on a first-come, first-served basis. If chosen booths are unavailable, the available space will be assigned as equitably as possible.	Preferred Booth #	Alternate Booth #

JOINT EXHIBIT

The undersigned wishes to exhibit the following books, journals, and/or other promotional material at the Joint Exhibit. The CMS is not liable for any loss of, or damage to, any of these materials. Materials displayed at the Joint Exhibit will be donated to the sponsoring university **(University of Ottawa)** at the end of the meeting and may not be removed or retrieved during the meeting. This booth cannot be attended and/or staffed by any representative of participating publishers.

Title	Author or Editor	Price in Cdn dollars	Price in US dollars

# books/journals/posters/catalogues @ $ 30 (Cdn)	$
OR # booths @ $ 400 (Cdn) or $300 (Cdn) for corporate members	$
# extra reps @ $ 30.00	$
all exhibitors, add 7% GST	$
GST # 11883 3979 RT0001 **TOTAL**	$

Payment: □Cheque (payable to CMS)   □VISA   □MasterCard

If paying by Credit Card:	Card #:	Expiry:

If this is your credit card, print your name as it appears on the credit card and sign your name. If not, print holder's name and have the card holder sign.

Print: Signature