

# 2021 CMS Summer Meeting

|                     |              |
|---------------------|--------------|
| Company Name:       |              |
| Contact Person:     | Phone:       |
| E-mail address:     |              |
| Billing Address:    |              |
| Billing Address:    |              |
| City                | Postal Code: |
| Representatives: 1. | 2.           |
| 3.                  | 4.           |

|  |                          |  |
|--|--------------------------|--|
| Exhibit                                  | \$250 (\$200 CMS Member) |  |
| Full page conference program advertising | \$100                    |  |
| Half page conference program advertising | \$60                     |  |
| Sponsorship Opportunities                | \$_____                  |  |
|  |                          |  |
|  |                          |  |
|  |                          |  |
|  | Subtotal                 |  |
|  | 13% HST                  |  |
|  |                          |  |
| (GST # 11883 3979 RT0001)                | <b>TOTAL</b>             |  |

|                       |        |  |      |  |            |  |              |
|-----------------------|--------|--|------|--|------------|--|--------------|
|                       | Cheque |  | VISA |  | Mastercard |  | Expiry Date: |
| Card Number:          |        |  |      |  |            |  |              |
| Cardholder Name:      |        |  |      |  |            |  |              |
| Cardholder Signature: |        |  |      |  |            |  |              |

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