

# Exhibitor Meeting Room Application

## Individual Function and/or One-Day Meeting Space

**DEADLINE: DECEMBER 6, 2004**  
**Fax to: (703) 907-7602**

**This application is for meeting space required for a one-time function or a one-day period only. If you require multi-day meeting space for two or more days, contact CES Sales at [psydnor@CE.org](mailto:psydnor@CE.org) for a referral to a sales representative.**

- HOTEL AVAILABILITY:** This application is for meeting space requests at the LAS VEGAS HILTON OR RIVIERA HOTEL ONLY. Limited meeting space is available for officially contracted CES exhibitors holding individual function and/or one-day meeting space at these hotels.
- ASSIGNMENT & RATES:** Meeting space will be assigned on a first-come, first-serve basis and will be charged **\$250 per individual room used (under 4 hours) or \$500 for the day (over 4 hours)**. This is an application fee that **only** covers room rental. Applicable charges for room set, audiovisual, telecommunication, or catering services are to be paid by the exhibitor.
- CONFIRMATION & PAYMENT:** Should your request be fulfilled, a confirmation letter and invoice outlining the space assignment will be faxed to your attention. **Payment received with this application will guarantee space assignment if available. Final payment must be received within two weeks of confirmation or your meeting room will be canceled.**
- REFUND POLICY:** Monday, December 6, 2004 is the last day you may cancel meeting space and receive a full refund. Cancellations made after this date will not be refunded. All cancellations must be submitted in writing to the International CES Operations Department **and** the hotel to which your event was assigned. See below for contact information.
- MEETING LOGISTICS:** Once your space is assigned, a hotel representative will contact you to discuss your specific room set requirements.
- ALTERNATE ARRANGEMENTS:** The information you are providing below is used only as a guideline to determine what room best suits your requirements. If we cannot accommodate your request, a meetings manager will contact you and offer assistance in finding function space at other official International CES hotel properties. If you are interested in another hotel, we can forward you a list of official International CES hotels and contact names.

<b>Name</b>	<b>Phone</b>
<b>Email</b>	<b>Fax</b>
<b>Company</b>	<b>Booth # (required)</b>
<b>Street Address</b>	
<b>City/State/Country</b>	<b>Postal Code</b>

**One form per function. Since meeting space is very limited, please submit three choices for your function so we may do our best to accommodate your request.**

	Hotel Preference (Please circle)	Event Date	Start Time	End Time
1 <sup>st</sup> Choice	LV Hilton    Riviera			
2 <sup>nd</sup> Choice	LV Hilton    Riviera			
3 <sup>rd</sup> Choice	LV Hilton    Riviera			

Room Set-Up Requirements	Audio Visual / Telecommunication Requirements	Catering Requirements
Number of people: _____ <input type="checkbox"/> Theater <input type="checkbox"/> Classroom <input type="checkbox"/> Conference <input type="checkbox"/> Hollow Square <input type="checkbox"/> U-Shape <input type="checkbox"/> Banquet Rounds <input type="checkbox"/> Cocktail Tables <input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Podium <input type="checkbox"/> Easel with Flip Chart <input type="checkbox"/> Overhead Projector and Screen <input type="checkbox"/> Rear Projection System <input type="checkbox"/> Front Projection Equipment and Screen <input type="checkbox"/> Microphone <input type="checkbox"/> Internet Requirements: _____ <input type="checkbox"/> Other (specify): _____	Number of people: _____ <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Break <input type="checkbox"/> Dinner <input type="checkbox"/> Reception <input type="checkbox"/> Meeting



**SELECT PAYMENT METHOD**

A formal invoice will be included with your confirmation letter upon the acceptance of your application.

☐ **Check Enclosed**                      **Check #** \_\_\_\_\_

☐ **VISA**                      ☐ **MasterCard**                      ☐ **AMEX**                      ☐ **Discover**

**Name as it appears on card** \_\_\_\_\_

**Cardholder's signature** \_\_\_\_\_

**Credit Card Number** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_ / \_\_\_\_\_

**Total Due \$** \_\_\_\_\_ **Amount Paid \$** \_\_\_\_\_