

# EXHIBITOR BADGE PRE-REGISTRATION FORM

For pre-registration of on-site booth personnel, **RETURN THIS FORM NO LATER THAN March 9, 2018**. After that date, register on-site at the Hynes Convention Center, Boston, MA.

Mail to: **REGISTRAR / GLOBALCON 2018,**  
**AEE, 3168 Mercer University Drive, Atlanta, GA 30341**  
FAX to: (770) 447-4354, Phone: (770) 447-5083, ext. 226 Email: [connie@aeecenter.org](mailto:connie@aeecenter.org)

**1) BOOTH MANAGER** - Person who will be responsible for booth at show:  
**(PLEASE TYPE OR PRINT CLEARLY TO ENSURE PROPER SPELLING)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #:(\_\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

FAX #:(\_\_\_\_\_) \_\_\_\_\_

**2) Additional Booth Personnel** - Person(s) who will assist at booth during show:  
**(PLEASE TYPE OR PRINT CLEARLY TO ENSURE PROPER SPELLING)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #:(\_\_\_\_\_) \_\_\_\_\_ FAX #:(\_\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #:(\_\_\_\_\_) \_\_\_\_\_ FAX #:(\_\_\_\_\_) \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Company:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Phone #:**( ) \_\_\_\_\_ **FAX #:**( ) \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Company:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Phone #:**( ) \_\_\_\_\_ **FAX #:**( ) \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Company:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Phone #:**( ) \_\_\_\_\_ **FAX #:**( ) \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Company:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Phone #:**( ) \_\_\_\_\_ **FAX #:**( ) \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Company:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Phone #:**( ) \_\_\_\_\_ **FAX #:**( ) \_\_\_\_\_

**Note: You may make copies of this form for additional booth personnel (no limit).**

# **EXHIBITOR LUNCH ORDER FORM**

*Note: Lunch is not included with your booth rental.  
You must pre-order these tickets for booth personnel.*

Please reserve \_\_\_\_\_ at \$15.00 each in advance (\$20.00 each on-site, if available) for the Conference Attendee Luncheon at 12:00 p.m. on Wednesday, March 21, 2018.

Please reserve \_\_\_\_\_ at \$15.00 each in advance (\$20.00 each on-site, if available) for the Conference Attendee Luncheon at 12:00 p.m. on Thursday, March 22, 2018.

**Reservations with payment need to be made by March 9, 2018**  
(After this date, ticket availability is on a "stand-by" basis only, if available)

Total Enclosed: \$ \_\_\_\_\_

American Express     VISA     MasterCard

Card #: | | | | | | | | | | | | | | | | | | CVV Code: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Mail to:** Registrar, GLOBALCON 2018  
3168 Mercer University Drive  
Atlanta, GA 30341

**Or Fax to:** (770) 447-4354  
**Email:** [connie@aecenter.org](mailto:connie@aecenter.org)

PLEASE TYPE:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #:( ) \_\_\_\_\_ FAX #:( ) \_\_\_\_\_

*Questions Concerning Luncheon:  
CALL Connie Meadows at (770) 447-5083 ext.226 or email [connie@aecenter.org](mailto:connie@aecenter.org)*