



Exhibit Space Contract
American Society of Civil Engineers – International Pipelines Conference 2008
Omni Hotel at CNN Center • Atlanta, GA • July 22 – 24, 2007

Return signed contract and payment to:
ASCE, Attn: Sean Scully, P.O. Box 79668, Baltimore, MD 21279-0668, USA
Phone: (703) 295.6154 Fax: (703) 295.6276
OFFICIAL USE ONLY

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Booth(s) assigned: _____
Date Assigned: _____
Total Booth Cost: _____
Amount Received: _____
Check#: _____
Balance due: _____
Check#: _____

1. INFORMATION FOR SHOW PROGRAM:

Complete Company Name as it will appear in Final Program:

Parent Company or Official Company Name: _____

Street Address: _____

City, State, ZIP: _____

Telephone: () _____ Fax: () _____

Email: _____ Website: _____

Correspondence should be sent to: _____

Address: _____

City, State, ZIP: _____

Telephone: () _____ Fax: () _____

Email: _____

Booth preferences: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

2. PAYMENT INFORMATION:

Number of booths at \$1,850 each _____ Total amount: _____

Check Visa MC AMEX

Card Number: _____ Expiration date: _____

Cardholder's Name: _____

Authorized Signature: _____

3. PAYMENT POLICY:

Contracts must be accompanied by partially refundable deposit equal to 50% of the total rent for each booth requested. The balance is due May 22, 2008. Applications received after May 22, 2008, must be accompanied by full payment.

4. RULES & REGULATIONS:

It is understood that this document will become a binding Contract upon acceptance by ASCE and incorporated into this contract are the terms, conditions, rules and regulations contained herein. Please retain a copy of this contract for your records. Your signature is acceptance of the Rules & Regulations as included with this contract. The Application will be returned if it is not properly signed and space will not be assigned until the contract is properly executed and/or the appropriate payment is received. The signer agrees to accept the space assigned and can reject it within 10 days of the date of confirmation.

Authorized Applicant Signature _____ Title _____ Date _____

ASCE Representative _____ Date _____