

**EVENT INFORMATION**

Order #:

EVENT NAME \_\_\_\_\_ EVENT DATES \_\_\_\_\_ BOOTH #

**CONTACT INFORMATION**

COMPANY NAME \_\_\_\_\_ CONTACT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street City Province/State Postal Code/ ZIP Code

EMAIL \_\_\_\_\_ TELEPHONE \_\_\_\_\_

Number of balloons: \_\_\_\_\_

Description of set-up: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The Exhibitor agrees to accept full responsibility for all helium filled products used as part of our display or decorations.  
 It is agreed that no helium balloons will be handed out. All balloons must be secured to a firm base within the display or assigned space.  
 This responsibility includes the deposit of \$250 in case of the removal of all helium products from the show as well as the retrieval of any that escape.  
 All helium tanks are to be stored and secured in an upright position in accordance with the Hazardous Chemicals Act.  
 Helium tanks used for this purpose must be removed from the RBC Convention Centre prior to the opening of the show.

I hereby authorize the RBC Convention Centre Winnipeg to perform the service described above and agree to assume complete responsibility for all charges for service.

\_\_\_\_\_  
 Authorized Signature Name & Title of Authorized Representative Date MM/DD/YY

\_\_\_\_\_  
 Show Manager Authorization Name & Title of Authorized Representative Date MM/DD/YY

\_\_\_\_\_  
 RBC Convention Centre Authorization Name & Title of Authorized Representative Date MM/DD/YY

**PAYMENT INFORMATION**

Make cheques payable to:  
 RBC Convention Centre  
 Winnipeg  
 375 York Avenue  
 Winnipeg, MB  
 R3C 3J3

Visa MasterCard

CREDIT CARD # \_\_\_\_\_ EXP \_\_\_\_\_

NAME AS IT APPEARS ON CARD \_\_\_\_\_

To email or fax your form:  
 services@wcc.mb.ca or  
 Fax: 204-957-4576  
 For further inquiries or information call  
 Exhibitor Services at 204-957-4538