

As outlined in your confirmation letter, please complete the information below and then **sign and return** to confirm you have read and accept the Terms and Conditions outlined in the *Rules and Regulations* within the Exhibitor Manual. Please print when completing this form as this information will be used for future correspondence.

PRIMARY CONTACT INFORMATION**CONFIRMED BOOTH /TABLETOP #:** _____

Primary Contact Name: _____

Company Name: _____

Address: _____

Telephone: _____ Cell: _____

Email: _____

Please complete only if on-site contact is different from primary contact:

On-site Contact Name: _____

Telephone: _____ Cell: _____

Email: _____

It is agreed that the space assigned to _____ (Company name) is acceptable and that the exhibit space is subject to the terms, conditions, rules and regulations as determined by the Canadian Thoracic Society.

"The information as indicated above is correct. Please confirm our participation as outlined."

Signature: _____

Date: _____

Authorizing Signing Officer

Please return this form by email no later than February 22, 2019 to:

Canadian Thoracic Society
c/o Linda Kollesh
30 Concourse Gate, Unit 27, Ottawa, ON K2E 7V7
Tel: 613-235-6650 Ext. 124
Email: crc@cts-sct.ca

