

EXHIBIT DATES: September 17–18, 2024, Toledo Hilton

Toledo, OH, USA | September 16-19, 2024

glassproblemsconference.org

GLASSWeek 2024

CONFERENCE ON GLASS PROBLEMS

Organized by Glass Manufacturing Industry Council and Alfred University

Exhibit Application

APPLICATION MUST BE COMPLETED IN FULL BY THE EXHIBITOR

Payment Schedule

A 50% non-refundable deposit is due with the submission of this contract. Final payment is due **August 17, 2024**.

Rental Rate (10-ft x 10-ft booth)

Non-member — **\$1,550**

GMIC member — **\$1,350**

Booth Selection

1st Choice _____

2nd Choice _____

3rd Choice _____

Competitors:

Please list all companies that you DO NOT WANT to be located near. Every effort will be made to comply with this request.

Rental Includes:

- 6-ft skirted table with 2 sides chairs, wastebasket/liner.
- Exhibit area is carpeted.
- 8-ft back wall with hunter green and white drape
- 3-ft sidewall with hunter green and white drape
- One (1) standard electrical outlet (500-watt)
- ID sign with company name and Booth number.
- Two (2) Exhibit Only badges for representatives to staff the booth, with the ability to register additional Exhibit Only Personnel for a nominal fee (\$200).
- Complimentary 100-word listing in Online Expo Directory that will appear on www.glassproblemsconference.org.
- Complimentary 100-word listing in the GPC Conference Guide that will be distributed to all registered conference attendees. Deadline for submitting listing is June 21, 2024.
- An electronic list of all registered attendees (names and addresses!only) will be made available approximately 3 weeks prior to and!after the conference.

Contact

Should you have any questions please contact:

Mona Thiel

mthiel@ceramics.org
Phone: 614-794-5834

Exhibitor Profile (Company Name as it should appear on all pertinent Exhibitor Listings. If "The" is the first word of the Company name, we will alphabetize by the second word of the Company name).

Full Company Name for listing

Company Address for listing

Company website for listing

Contact Person for all Correspondence and Service Manual

Name: _____

Title: _____

Telephone: _____

Facsimile: _____

E-mail: _____

Address: _____

Sales and Marketing Manager: _____

Exhibitor Authorized Signature↑

Date↑

Payment Information:

Check enclosed for \$_____ (check payable to The American Ceramic Society in U.S. dollars drawn on a U.S. bank)

Please charge my credit card \$ _____

VISA MasterCard AMEX Exp. Date _____

Credit Card Number _____
CVV _____ (3 or 4 digit number on back)

Credit Card Billing Zipcode _____

Do not send credit card information via email

Signature↑

Name of cardholder (please print)

**If you are paying by credit card, please fax to 1-614-818-9485
OR call 1-614-794-5834.**

**Please mail payment (check only) to:
Glass Manufacturing Industry Council (GMIC)
550 Polaris Parkway, Suite 510
Westerville, OH 43082-7045**