



# EXHIBIT SPACE RESERVATION APPLICATION

## ISSLED 2008

International Symposium on Semiconductor Light Emitting Devices

April 27 - May 2, 2008  
Hyatt Regency  
Phoenix, Arizona, USA

Exhibition Dates: Monday, April 28-Friday, May 1 • To reserve exhibit space, complete this form and return to:

<b>MAIL</b>	<b>TMS</b> 184 Thorn Hill Road, Warrendale, PA 15086-7514	<b>FAX</b>	<b>(724) 776-3770</b>	<b>E-MAIL</b>	<b>exhibits@tms.org</b>
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For more information, telephone (724) 776-9000, ext. 231, or visit [www.tms.org/meetings/specialty/issled08](http://www.tms.org/meetings/specialty/issled08)

It is understood that upon receipt of the completed form, TMS will process the applicant's options, assigning a space location. Space rental must be paid in full by April 24, 2008. A nonrefundable deposit of \$275 is required to secure each space reserved and must be paid at the date of application. Application for space rental indicates the applicant's willingness to abide by all exhibit terms and conditions and general regulations.

**TMS is hereby authorized to reserve the specified quantity of 10'x10' exhibition space(s) for our company in the ISSLED 2008 exhibition:**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Contact Person (to receive correspondence and exhibit materials) \_\_\_\_\_

Company Name (as it should appear in exhibitor listings) \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ E-mail \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Web Site URL \_\_\_\_\_

**Please reserve \_\_\_\_\_ (quantity) 10'x10' spaces @ \$1,800 per 10'x10' space.**

**The exhibit space rental includes: six-foot draped table; two chairs; 110 vac electrical service; one full conference registration.**

**Payment Information:**

- Check (made payable to TMS)
- VISA       MasterCard

- TOTAL AMOUNT ENCLOSED \$ \_\_\_\_\_
- Diners Club       American Express

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

**TMS USE ONLY**

Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_

Space No. Assigned: \_\_\_\_\_ Invoice No.: \_\_\_\_\_ Invoice Date: \_\_\_\_\_ Invoice Amount: \_\_\_\_\_