

EXHIBIT SPACE RESERVATION FORM

JUNE 18 - 21, 2018

NIST Headquarters, Gaithersburg, Maryland

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Return this form to: MAIL TMS Attn: Doug Shymoniak 5700 Corporate Drive Suite 750 Pittsburgh, PA 15237 USA ASK

Questions? **Contact Doug Shymoniak** Phone: 1-724-814-3140 E-mail: dshymoniak@tms.org

EXHIBIT INFURMATION	
Reserve (quantity) table-top spa	ce(s) for the Additive Manufacturing Benchmarks 2018
	0" draped table; two chairs; wastebasket; standard electricity. Admission to the exhibit area wil or table. Please contact TMS for information about adding a second person to staff your table o ation at a special rate.
must be paid in full by April 18, 2018. A not	mpleted form, TMS will assign a space to the exhibiting company. The fee for the space, \$1,850 (USD) nrefundable deposit of \$500 is required to secure each space reserved and must be paid at the date o dicates the applicant's willingness to abide by all exhibit terms and conditions and general regulations
Accepted and agreed by:	
Contact Person:	
Title:	
Company Name:	
Street Address:	
	State/Province:
Zip/Postal Code:	Country:
Telephone:	Fax:
E-mail:	
	PAYMENT
Total Payment \$ Payment Method (Check all that apply): Check, Bank Draft, Money Order Credit Card	Payment should be made in U.S. dollars drawn on a U.S. bank. Visa MasterCard Discover American Express Card No Expiration Date CVV#
	Cardholder Name
☐ Please invoice me	Signature:
(Make checks payable to TMS.)	I authorize TMS to charge my credit card in the amount of \$