

2011

The SAAC Show

Long Beach Convention Center

August 24-25, 2011



Crick Information Technologies, Inc.
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LIVING TRADESHOW LEAD RETRIEVAL ORDER FORM

The SAAC Show 2011
Long Beach Convention Center
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EXHIBITOR INFORMATION

Contact Name/Title _____

Company Name _____

Address _____

City _____

State/Providence _____

Zip Code _____

Country _____

Phone _____

Fax _____

Email _____

Booth Number _____

LIVING TRADESHOW PRODUCT

	Early Bird Thru 06/30/11	Advance Thru 07/31/11	Onsite After 07/31/11	# of Units	Total Cost
1. Living Tradeshow Solution - LTS	\$ 249.00	\$295.00	\$349.00	_____	_____
<i>LTS is the Official Lead Retrieval provider for this event. LTS is a real-time software and hardware solution for exhibitors to collect attendee contact information and provide marketing materials, electronically, to attendees.</i>					
2. Lead-IT — Qualified Lead Monitoring (Optional)					
Monthly (3 Month Minimum x \$99.00/month)			\$ 297.00	\$ _____	
Annual (12 Continuous months from close of show)			\$ 495.00	\$ _____	
<i>Lead-IT is a fee-based, real-time, web-based account used in conjunction with LTS to provide instantaneous, qualified-lead information to the exhibitor. Know who is looking at your information instantaneously. (To order Lead-IT, LTS Service must first be ordered)</i>					
			Subtotal	\$ _____	
			TOTAL	\$ _____	



Electrical Service is included in your booth space,
an available outlet will be required for LTS.

All Funds Shown are in US Dollars

No refunds after advance registration date.

By completing the Lead Retrieval Order Form, you agree to be held liable for the return of the Living Tradeshow unit and accessories.
If the unit is not returned or returned damaged, a \$500 replacement fee will be charged. You are responsible for the proper use and safekeeping of the equipment.

PAYMENT INFORMATION:

Visa MC AMEX Discover Diners Club JCB Check *

* Make Checks Payable, in US Funds, to: **Crick Information Technologies, Inc.**

Name on card: _____

Email for Cardholder _____

Company Name (If Applicable) _____

Card #: _____

Billing Address: _____

Expiration Date: _____

City, State/Providence: _____

CCV/Security #: _____

Zip Code/Postal Code: _____

Cardholder Signature: _____

Please scan and email to: orders@LivingTradeshow.com or fax to: 1.888.741.6002

Order confirmation and log-in password will be emailed upon receipt of payment