

Exhibitor Information

| | | |
|-----------------|------------------------|---------|
| Company | | Booth # |
| Address | | |
| City | Onsite Contact | |
| Prov/State | Phone (Office) | |
| Postal/Zip Code | Phone (Onsite contact) | |

Early Bird Price: order and payment must be received by February 7, 2020

MYLEADS – Standard Quantity Amount

A small, light weight & easy to carry scanner, equipped with just one key, allows for easy and straight forward use. Equipped with 128 KB of memory, it provides an economical method of collecting leads. An electronic file is provided within one business day after the show closes.

No electrical power required.

○ Email To: _____

** No electrical outlet required **

EarlyBird Price \$226.00
 (\$200.00 + \$26.00 HST)

Price (After Feb. 7) \$254.25
 (\$225.00 + \$29.25 HST)

| | |
|--|----|
| | \$ |
|--|----|

Payment

| | | | | |
|--|---|--|--------------|----|
|  | <input type="checkbox"/> Paying by Cheque Cheque Payable to CONEXSYS Registration Ltd | 13% HST included in all prices HST# 134 737 477 | TOTAL | \$ |
|--|---|--|--------------|----|

| | | |
|-----------------------------------|---------------------------|-------|
| Account # | Expiry Date | CVV # |
| Cardholder <i>Please Print</i> | Signature | |
| Ordered By <i>Please Print</i> | Email address for receipt | |

CANCELLATION POLICY: No refunds after February 7, 2020

| Complete both sides and return to: | Please Note: |
|---|--|
| <p>Order Online: conexsysleads.com Event Code: OFVC20E</p> <p>Order By Fax: (905) 405-9870 Order By Mail: CONEXSYS Registration Ltd. 34-7050B Bramalea Road Mississauga, ON L5S 1S9 Order By Email: troy@conexsys.com</p> <p>For additional Information Toronto: (905) 405-8415 Toll Free: (800) 661-5319</p> | <p>Barcode Scanners must be picked up at the Lead Retrieval Services desk located at the registration area. On-site orders see CONEXSYS at the Lead Retrieval Services desk.</p> <p>CONEXSYS will take reasonable precautions to ensure the safety and integrity of the data produced from this service and does not accept liability for any losses incurred resulting from missing or invalid information.</p> |

Exhibitor Lead Menu (Optional)

Exhibitor: _____

Booth: _____

REFERENCES: (MAXIMUM 8)

Ex. Sales Reps, Territories, Divisions, etc.

| | | | |
|---|--|---|--|
| 1 | | 5 | |
| 2 | | 6 | |
| 3 | | 7 | |
| 4 | | 8 | |

PRODUCTS AND SERVICE:

| | | | |
|----|--|----|--|
| 1 | | 14 | |
| 2 | | 15 | |
| 3 | | 16 | |
| 4 | | 17 | |
| 5 | | 18 | |
| 6 | | 19 | |
| 7 | | 20 | |
| 8 | | 21 | |
| 9 | | 22 | |
| 10 | | 23 | |
| 11 | | 24 | |
| 12 | | 25 | |
| 13 | | 26 | |

FOLLOW UPS: (MAXIMUM 8)

| | | | |
|--------------------------|------------------------------|--------------------------|-------|
| <input type="checkbox"/> | 1. PHONE CALL | | OTHER |
| <input type="checkbox"/> | 2. SALES VISIT | <input type="checkbox"/> | |
| <input type="checkbox"/> | 3. DEMONSTRATION | <input type="checkbox"/> | |
| <input type="checkbox"/> | 4. QUOTATION | <input type="checkbox"/> | |
| <input type="checkbox"/> | 5. SEND LITERATURE | <input type="checkbox"/> | |
| <input type="checkbox"/> | 6. HOT LEAD (URGENT) | <input type="checkbox"/> | |
| <input type="checkbox"/> | 7. SEE NOTES | <input type="checkbox"/> | |
| <input type="checkbox"/> | 8. READY TO PURCHASE | <input type="checkbox"/> | |
| <input type="checkbox"/> | 9. MAKES PURCHASING DECISION | <input type="checkbox"/> | |
| <input type="checkbox"/> | 10. ORDER PLACED AT SHOW | <input type="checkbox"/> | |

PLEASE TYPE OR PRINT