GOMACTech-05 APPLICATION FOR EXHIBIT SPACE

We hereby apply for exhibit space at the GOMACTech (April 4-7, 2005 Riviera Hotel, Las Vegas, NV). We agree to abide by the Conference Exhibit rules as stated on the reverse side of this contract form.

	Name of Cor	npany			
	Street Address —				
	City, State, Z	Zip Code			
	Company Co	ontact	Telephone		
	Email		Fax		
	Web Addres	ss			
	We will exhi	bit and demonstrate the	he following products or services:		
		_Manufacturers _Manufacturers' Rep _Other (Please expla			
	If a manufacturers' representative, list the company or companies whose products will be displayed				
	We would like to reservebooth(s) at \$2000 per booth. Enclosed is our check for \$				
Е	Booth Number(s)	Desired (in priority of	order):		
	1	1 2 3 4 5.			
	Complet	te application in full a MAKE CHE	nd return with payment by February 1 CK PAYABLE TO GOMAC	5, 2005.	
Credit Card #			Exp:		
A countersigned	copy will be sen	t to you as acceptance	e of this application.		
Authorized by	Signature		Date		
		Send this ar	oplication with payment to:		
			OMACTech		
	c/o Palisades Convention Management Attn.: Kate Dickie, Exhibit Sales Manager (G-'04) 411 Lafayette Street, Suite 201 New York, NY 10003				
	CONFIRMATION (To be completed by GOMACTech representative)				
	Booth Number(s) Assigned:				
	Signature				
	Name and Title				
		Date			