EXHIBITOR ROOM REQUEST
254th American Chemical Society
National Meeting & Exposition
Washington, DC
Meeting – August 20 – 24, 2017
Exposition – August 20 – 22, 2017

COMPANY INFORMATION
Name of Event/Meeting ____________________________________________________________
Company ____________________________________________________________ Booth Number __________________
Show Contact ___________________________ Title ________________________________________________
Address _____________________________________________________________________________
E-mail __________________________________________ Tel ____________________ Fax ______________________

MEETING INFORMATION
Where do you prefer to be located? ___ Convention Center  ___ Official Meeting Hotel
Meeting Type  ___ Breakfast  ___ Lunch  ___ Dinner  ___ Reception  ___ Other
Requested Layout  ___ Theater  ___ Classroom  ___ Banquet  ___ Hollow Square  ___ Conference
Set For _____ # of People  Date ________________ Start/End Time __________________
Publicize ___  Non-Publicize ___  Food & Beverage Required _____ Yes  _____ No
Additional AV/Internet Needs __________________________________________________________

The meeting room user must be an exhibiting company or affiliated organization.
- Meeting room utilization is for food functions, meetings, and staff offices only.
- Meeting room users may place one (1) sign outside of the assigned room.
- Meeting rooms will be assigned in order in which requests are received.
- ACS Meeting Logistics Team will send a meeting room confirmation to the company contact.

Since 2011, the ACS Divisions have encouraged meeting-wide attendance at The Fred Kavli Innovations in Chemistry Lecture held on Mondays of ACS national meetings. If you have events that fall on Monday, August 21 from 5 – 7 PM, we ask that you reschedule to allow for attendance at The Fred Kavli Foundation Innovations in Chemistry Lecture.

BILLING INFORMATION
The meeting room rental includes the standard room set for $1,500.
Cardholder/Signature ________________________________________________________________
Card Number ______________________________ Expiration ___________ Security Code ____________
Any additional requests for audio visual, internet, food/beverage, etc. will be billed after the meeting.

RETURN FORM: Please return the completed form to ACS National Expositions at expo@acs.org or fax to 202-872-4410 for further processing.

To Be Completed by ACS Staff:
Expo received and to Logistics __________ Processed by Logistics __________ Assigned Location ______________