

Co-Hosted By



MCE DEEPWATER DEVELOPMENT 2014

8-10 APRIL, 2014 • MADRID, SPAIN



Organized By Quest Offshore In Partnership With

www.MCEDD.com

Please fax completed form to +1 (281) 491-5902

EXHIBITION OPPORTUNITIES

\$585 PER SQUARE METER

SHELL SCHEME MINIMUM 9SQM

- 1 - FULL DELEGATE (PER 9SQM)
- 5 - EXPO ONLY PASSES (PER 9SQM)

*MUST PURCHASE SHELL SCHEME PACKAGE TO MATCH BOOTH SIZE

\$585 PER SQUARE METER

SPACE ONLY

- 1 - FULL DELEGATES (PER 9 SQM)
- 5 - EXPO ONLY PASSES (PER 9 SQM)

EXHIBITOR DISCOUNT: ADD AN ASSOCIATE LEVEL SPONSORSHIP FOR JUST \$1,250 (\$3,000 MARKETING SPONSORSHIP VALUE)

Associate Level Sponsorship includes:

Logo on conference website; Logo on conference program/agenda; Logo on pre and post mailers to attendees; Logo on post conference proceedings; Logo on onsite signage.

9 SQM SHELL SCHEME PACKAGE: \$1,400 + \$115 PER EACH ADDL. SQM

- 1 - ROUND TABLE / 2 CHAIRS
- 3 - SPOTLIGHTS
- SECURITY FOR ON-EXHIBIT HOURS
- OVERNIGHT BOOTH CLEANING
- COMPANY IDENTIFICATION SIGN

ADDITIONAL DELEGATES

- \$925 ADDITIONAL CONFERENCE DELEGATE
- \$179 EXPO ONLY GUEST PASS

EXHIBIT BOOKING FORM

To book your Exhibition Package, complete the form below and fax to +1 (281) 491-5902, or download forms from www.MCEDD.com.

First Name: _____ Last Name: _____

Title / Position: _____

Company: _____ Country: _____

Billing Address: _____

Telephone: _____ Email: _____

STEP 1

Type of Exhibit: # _____ Shell Scheme (Minimum 9sqm) * Total Sqm: _____ x \$585 = _____

* STEP 2 # _____ Space Only Total Sqm: _____ x \$585 = _____

Required for # _____ Additional Conference Delegate \$925 _____

exhibit # _____ Associate Level Sponsorship \$1,250 _____

Total: _____

Total Billed by Quest Offshore

* STEP 2

Shell Scheme Package:

_____ 9 sqm Package	=	\$1,400
	+	
_____ addl. sqm X \$115	=	\$ _____
		Total \$ _____

* Total Billed by A-Booth Exhibition Services

Preferred booths: (1) _____ (2) _____

Payment Net 45 Upon Receipt of Invoice

Signature _____

* This signature signifies that the exhibitor has read, understands, and agrees to all the terms and conditions on this form (including the exhibition rules & regulations published on the event's official website, which constitutes as part of this agreement).

Please contact me regarding sponsorship opportunities.

Method of Payment: Invoice

Card# _____ Exp. Date _____

Name on Card _____ Signature _____

CANCELLATION POLICY: IF AN EXHIBITOR/SPONSOR REDUCES OR CANCELS AFTER SIGNING THE COMMITMENT FORM, A CANCELLATION PENALTY OF 25% OF TOTAL COMMITMENT WILL BE ASSESSED. IF AN EXHIBITOR/SPONSOR REDUCES OR CANCELS 60 DAYS PRIOR TO CONFERENCE DATE, A CANCELLATION PENALTY OF 50% OF TOTAL COMMITMENT WILL BE ASSESSED. IF AN EXHIBITOR/SPONSOR REDUCES OR CANCELS 30 DAYS PRIOR TO CONFERENCE, TOTAL AMOUNT OF COMMITMENT IS DUE.

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