

COMPANY _____ BOOTH # _____ PHONE # _____
 CONTACT _____ E-MAIL _____ FAX # _____

**PLEASE COMPLETE THIS FORM ONLY IF SHIPPING EXHIBIT MATERIALS
 WITH GREAT LAKES TRANSPORTATION**

Credit card information must be on file prior to pickup, please complete the Great Lakes Events Method of Payment form found earlier in the exhibitor manual.

Clearly label all shipments with the destination's address. At showsite you must complete an outbound Bill of Lading before leaving, and may use our complimentary shipping labels at the Great Lakes Events Service Desk.

Any organization using Great Lakes Transportation must have the proper insurance coverage for shipping.

INSURANCE COVERAGE: _____

PICKUP INFORMATION

Shipper Name: _____

Shipping Address: _____

Requested Pickup Date & Time: _____

DESCRIPTION OF SHIPMENT

SERVICE TYPE

Piece Count		Weight			
_____	Crates	_____	<input type="checkbox"/>	Standard Ground:	3-5 business days
_____	Cartons	_____	<input type="checkbox"/>	Speedy Ground:	2-3 business days
_____	Fiber Cases/Trunks	_____	<input type="checkbox"/>	Next Day:	Next business day
_____	Carpet	_____	<input type="checkbox"/>	Second Day:	Second business day
_____	Other	_____	<input type="checkbox"/>	Defer:	3-4 business days
_____		_____	<input type="checkbox"/>	Specialized:	Uncrated, a truckload
_____	Total Pieces	_____		Total Weight	

DESIRED INBOUND DESTINATION

OUTBOUND SHIPPING

- GLE Advance Warehouse Location
- Directly to the Showsite Facility
- Other: _____

- Please contact me about shipping out of the show. My contact and shipment information is provided on this form.
 Desired Outbound Destination: _____

- I will be at showsite, and plan to visit the GLE Service Desk for outbound shipping assistance.