



ORDER FORM - ADDITIONAL EXHIBITOR BADGE

Company Name			
Primary Contact			
E-mail			
Street Address		City	
Province / State	ZIP/Postal Code	Country	
Office Phone	Mok	Mobile Phone	
# of passes required @ \$20		n (taxes incl.) TOTAL: \$	
Names of staff members w Name	orking in your booth. Name		
Credit Card: Visa Cardholder Name	Mastercard		
Credit Card No.		Exp. Date	
CVV Number	Signature	The charge on the card will appear as Power Sport Services	

Please email back completed form to jcamplani@motocanada.com

All ordered badges can be picked up at the Show Office: Jan 25th, 2024 after 12:00 p.m.

Please have each individual staff member check-in to the Show Office with appropriate identification to pick up their name badge.



