



October 3-6, 2010
McCormick Place South | Chicago, IL USA

COMPLIMENTARY ADVANCE REGISTRATION

Mail by September 3, 2010 to:

GRAPH EXPO 2010
c/o Convention Data Services
107 Waterhouse Rd.
Bourne, MA 02532
Fax: (508) 759-4552

1. Use one form per person.
2. NO ONE under the age of 14, including infants, will be admitted to the exhibition or seminars.
3. Please mail or fax this form postmarked by September 3, 2010 to receive a complimentary Exhibits-Only badge. Badges will be mailed shortly before the show. After the September 3 deadline, you may register on-site for \$45. This form is no longer valid after September 3, 2010.
4. Please note that there are NO refunds or cancellations for Exhibits-Only Registration. For more information, or to register for seminars: visit: www.graphexpo.com, e-mail: GRAPHEXPO@xpressreg.net or phone: (800) 748-5056 or (508) 743-8515.

Photocopy for Additional Registrations

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Please fill out this form completely. We are unable to process incomplete registrations.

Principal Business

- 01 Ad Agency/PR Firm/Graphic Designer
- 02 Association
- 03 Book Publishing/Printing
- 04 Commercial Printing
- 05 Consultant/Broker
- 06 Converting - Flexible Packaging
- 07 Converting - Folding Carton
- 08 Converting - Other
- 09 Dealer/Distributor
- 10 Digital Printing/Imaging Service
- 11 Education
- 12 Finance/Banking
- 13 Government
- 14 Healthcare
- 15 In-Plant Printing
- 16 Insurance
- 17 Label Printing
- 18 Magazine Publishing
- 19 Mailing/Distribution
- 20 Manufacturer/Supplier
- 21 Marketing Communications
- 22 Multimedia/Web Production
- 23 Newspaper Publishing
- 24 Package Printing
- 25 Quick/Instant Printing
- 26 Software Development
- 27 Student
- 28 Trade Bindery/Finishing
- 29 Wide/Large Format Printing/Imaging
- 30 Other _____

Primary Job Function

- 01 CIO/IT Professional
- 02 Designer/Creative
- 03 Editorial
- 04 Manager/Supervisor
- 05 Postpress Operator
- 06 Prepress Operator
- 07 President/Owner/CEO
- 08 Press Operator
- 09 Print Buyer/Purchasing
- 10 Production Operators
- 11 Production Supervisor
- 12 Sales/Marketing
- 13 Student/Educator
- 14 Vice President/Dept. Head
- 15 Other _____

What influence do you have in your company's buying decision?

- 01 Final Decision Maker
- 02 Significant Influence
- 03 Initial Recommendations
- 04 Research New Products
- 05 Not Applicable

No. of Employees

- 01 1 - 19
- 02 20 - 49
- 03 50 - 99
- 04 100 - 249
- 05 250 or more

Annual Sales Volume

- 01 Less than \$500,000
- 02 \$500,000 to \$1 Million
- 03 \$1,000,001 to \$3 Million
- 04 \$3,000,001 to \$5 Million
- 05 \$5,000,001 to \$10 Million
- 06 \$10,000,001 to \$20 Million
- 07 More than \$20 Million

Products of Interest

- 01 Art/Graphic Design
- 02 Bindery Equipment
- 03 Computer Hardware
- 04 Consumables
- 05 Content & Document Management
- 06 Converting - Flexible Packaging
- 07 Converting - Folding Carton
- 08 Copiers - B&W/Color
- 09 Electronic Publishing Systems
- 10 Ink & Toner
- 11 Material Handling Equipment
- 12 Mailing & Fulfillment Equipment
- 13 Package Printing Equipment
- 14 Paper & Substrates
- 15 Postpress Equipment
- 16 Prepress Equipment
- 17 Presses - Digital
- 18 Presses - Digital Electrophotographic - B&W
- 19 Presses - Digital Electrophotographic - Color
- 20 Presses - Digital Inkjet
- 21 Presses - Flexographic
- 22 Presses - Gravure

- 22 Presses - Sheetfed Offset
- 23 Presses - Web Offset
- 24 Promotional Products
- 25 Software/Cross Media
- 26 Software/Digital Printing
- 27 Software/MIS
- 28 Software/Print Production
- 29 Software/Workflow
- 30 Wide/Large Format Printers/Equipment
- 31 Other _____

I have special needs that are regulated by the Americans with Disabilities Act. Please send your requirements to: ops@gasc.org

I am a member of:
 NAPL NPES
 Printing Industries of America

I am a first time attendee to GRAPH EXPO.

REGISTRATION CODE **EC**

First Name _____ Last Name _____
 Title _____
 Company _____
 Address 1 _____
 Address 2 _____
 City _____ State _____ Zip _____
 Telephone _____ Country _____
 Mobile/Cell _____ Fax _____
 Enter cell number to receive only important show text messages. Cell numbers will not be sold.
 Mobile/Cell Service _____
 E-Mail _____
 (Fax and/or e-mail necessary for confirmation.)

I would like to receive special promotional offers and product information via e-mail from industry vendors. Yes No