



Mobile/Vehicle Spotting

**BusCon**

Indiana Convention Center - Indianapolis, Indiana

October 2 - 3, 2018

Discount Deadline **Tuesday, September 11, 2018**

Event Code: I110891018

**Connect With Us!**

email [Indianapolis@shepardes.com](mailto:Indianapolis@shepardes.com)  
 phone (317) 677-1235  
 fax (317) 389-5524  
 mail 6101 West 80th Street  
 Indianapolis, IN 46278

**Displaying a vehicle at the event?** (including rolling stock, self-propelled, towed and/or pushed vehicles/machinery.)  
 All vehicles must be escorted on and off the floor by a Shepard representative.  
 Shepard charges a round-trip fee, per vehicle, to place a vehicle on the tradeshow floor.

**Step 1:** If you have a vehicle, make sure it is shown on the official floorplan by alerting Customer Service or your Event Management.

**Step 2:** Contact Customer Service to **schedule** your move in and out. Vehicle placement must be supervised by the Exhibitor.

All vehicles must be removed no later than **Wednesday, October 03, 2018 6:00 PM**  
 Any vehicles left after that time are subject to removal by towing or other means. Exhibitors are responsible for all removal charges.

**Important Rules and Regulations**

Battery Cables must be disconnected  
 Gas Cap must either be taped shut or have a lockable gas cap.  
 Must contain less than 1/4 tank of gas.  
 Keys must be given to Shepard Exposition Services to be held onsite.  
 Exhibitor is responsible for checking local Fire Marshal rules and regulations for additional requirements.

Code	Qty	Item	Roundtrip
35106		Motorized Unit/Vehicle Spotting	\$ 250.00

\*Additional fees may apply if mobile spot cannot be driven into place and must be assisted or if scheduled mobile spot time is missed.

Signature indicates you read and accept the Payment Policy and Terms & Conditions.

No refunds or exchanges once item has been delivered to your booth.

Cancellations must be received in writing within 48 hours of 1st day of exhibitor move in.

Total Bar: \$ \_\_\_\_\_  
 NA Tax\*: \$ \_\_\_\_\_  
 Amount Due: \$ \_\_\_\_\_

Company Name: \_\_\_\_\_ Booth# \_\_\_\_\_

Contact Name

Contact Email Address



Card Holder Signature