

2017 FQMC CONFERENCE

NOVEMBER 4, 2017

CENTREXPO DRUMMONDVILLE



BOOKING FORM

INCLUDED

Curtain separation
8' table with 2 chairs
1 trash can
Wi-Fi

NAME OF THE
ENTREPRISE

PARTERSHIPS

GOLD Partnership	20' X 12 Booth (inclusions X 2)	\$ 3 000
SILVER Partnership	20' X 12 Booth (inclusions X 2)	\$ 2 500
BRONZE Partnership	20' X 12 Booth (inclusions X 2)	\$ 1 750

EXHIBITORS

10 X 12 (corner space - booth choices 4-8-12-16-20-24-28-32)	\$ 700
10 X 12 (standard booth)	\$ 500
10 X 8 (unique space for companies with fewer than 5 employees) (green booths on plan)	\$ 300

LUNCH (the GOLD partnership includes 3 meals, SILVER includes 2 meals & BRONZE includes 1 meal)

Nb of persons X \$ 35 (person) \$

PRIZES

Can we count on your generosity to offer prizes ?

YES, please indicate the quantity _____

ELECTRICAL

YES, I need electricy - normal electrical outlet - no cooking \$ 75

**DEPOSIT OF 50% OF THE AMOUNT IS DUE UPON SIGNING THIS CONTRACT
THE BALANCE IS DUE NO LATER THAN OCTOBER 1, 2017**

*If you choose the 50% deposit, it will be the exhibitor's responsibility
to supply final payment no later than October 1, 2017*

TOTAL	\$
50 % deposit	\$
DUE AMOUNT	\$

Please return this form duly completed and signed with the *Declaration of gluten-free product* with the deposit payment by mail or email: info@fqmc.org. Please send your logo **in high resolution**: info@fqmc.org.



Company Name :
 Contact Name :
 Address :
 City :
 Province :
 Telephone :
 Email :
 Signature :
 Printed name
 (authorized signatory)

	Title
	Postal code
	Cell.
	Date

**PAYMENT BY
 CHEQUE**

FONDATION QUÉBÉCOISE DE LA MALADIE COELIAQUE

4837, Boyer St, bureau 230
 Montreal (Quebec) H2J 3E6
 Tel.: 514-529-8806

Email: info@fqmc.org - Website: www.fqmc.org

**CREDIT CARD
 PAYMENT**

Card holder: _____

Visa Master Card

Expiration

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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SEC code (3 digits on card back)

<input type="text"/>	<input type="text"/>	<input type="text"/>
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For more security, please contact us for the payment

DECLARATION

For renting a booth during an annual event or such other event of the Fondation québécoise de la maladie coeliaque

 Name of person / Company name (manufacturer/ supplier /restaurant)

hereby certifies that the food he / she produces and / or sell are gluten free and as defined by the Canadian regulations that shall label, package, sell food or to advertise in order to give the impression that it is gluten-free if the food contains any gluten protein or modified gluten protein, including any gluten protein fraction, referred to the definition of the term gluten in subsection B.01.010.1 (1) * (Health Canada Regulations food and Drugs, Part B, Chapter 24), and he / she has taken and continues to take all reasonable steps necessary to ensure this.

To this end, the FQMC strongly recommends the use of testing / R5 ELISA assay recognized by the Codex Alimentarius (Food Standards FAO/WHO)

* Subsection B.01.010.1 (1) is defined as follows:

«gluten»

a) any gluten protein from the grain of cereals below or grain of a hybridized strain created from at least one of the following cereals:

- (i) barley
- (ii) oats
- (iii) rye
- (iv) triticale
- (v) wheat, kamut, spelled or;

b) any modified gluten protein, including any gluten protein fraction, which is derived from a grain cereals referred to in paragraph a) or grain of a hybridized strain that is described in this paragraph (gluten)

Signature _____

Name : _____

Title : _____

Date : _____