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## **INFOCOMM 2021 PROXY STATEMENT**

This form must be received via email <a href="mailto:exhibitsales@avixa.org">exhibitsales@avixa.org</a> prior to your scheduled appointment. We encourage you to review the floorplan for availability as close to your scheduled time as possible. If you have questions, please call the Expositions Department at +1.703.273.7200.

I will not be able to participate in the Priority Space Selection for InfoComm 2021 (Orlando, Florida) when selection is held. I wish to authorize either an AVIXA staff member or another representative from my company to select exhibit space on my behalf.

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☐ I authorize AVIXA	staff to select my company's exhibit	space according to the following ins	tructions.
☐ I authorize the com	pany representative* listed below to	select exhibit space according to the	ne following instructions.
Company Name:			
			Country:
Phone:			
Preferred Booth Location(	s):		
company hereby releases A 24 hours of your proxy sele contract within 48 hours of p	VIXA and its employees from any lia ecting a booth space. To confirm yo	ability. Final confirmation of assigned bur company's space assignment A posit on the assigned space no late	nated person indicated above. My exhibit space will be e-mailed within VIXA must receive: a signed digital r than October 16, 2020.
Signature:		Date:	
Company:			

PLEASE SIGN AND RETURN THIS COMPLETED FORM TO EXHIBITSALES@AVIXA.ORG