

ATTENDEE REGISTRATION FORM

SAVE \$20! Admission is FREE if you complete this form and bring it with you to Registration at the show.

Registration opens at 8 a.m. Wed. and Thurs.; exhibit halls open at 10 a.m. both days.

- Please photocopy this form to register additional attendees.

STEP 1 PLEASE PRINT NEATLY

First Name _____ Last Name _____

Company or Vessel Name _____

Address _____

City _____ State/Prov _____ Zip _____

Country _____

Phone _____ Fax _____

Email _____ Cell _____

From time to time CME will keep you informed by email about other events, products and services in the commercial marine industry. If you would prefer not to receive these communications, check this box.

From time to time CME will keep you informed by text messaging as it pertains to the show. If you would prefer not to receive communications in this format, check this box.

STEP 2 TYPE OF BUSINESS

Please check the number which best represents the majority of your involvement in the commercial marine industry:

Owner/Operator/Crew of:

- 1 Commercial Fishing Boat
- 2 Coastal/Harbor/Ocean-going Tug
- 3 Towboat/Pushboat/Barge
- 4 Patrol/Fire/Rescue Boat
- 5 Passenger/Vehicle Ferry
- 6 Pilot Boat
- 7 Excursion/Dinner Cruise Vessel
- 8 Military Vessel
- 9 Research/Education Vessel
- 10 Diving/Salvage Boat
- 11 Charter Boat
- 12 Private Yacht

- 13 Seafood Processing
 - 14 Aquaculture
 - 15 Marina Operator
 - 16 Marine Construction
 - 17 Commercial Boat Builder
 - 18 Repair/Storage
 - 19 Marine Services/Supplies
 - 20 Marine Surveyor
 - 33 Naval Architect/Engineer
 - 21 Equipment Manufacturer
 - 22 Equipment Distributor
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- 23 Education
 - 24 Finance/Leasing/Insurance
 - 25 Government
 - 26 Harbormaster
 - 27 Military Buyer
 - 28 Port Authority/Port Engineer
 - 29 Press
 - 30 Family Member
 - 31 Other _____

STEP 3 JOB TITLE

- Self Employed
- President/Owner
- Vice President/COO
- Purchasing Manager/Agent
- Captain/Officer
- Crew
- Manager/Foreman/Supervisor
- Other _____

STEP 4 REGISTER ADDITIONAL ATTENDEES

Photocopy this form and complete a form for each additional attendee. One attendee per form.

STEP 5 FAX TO: 207-799-1762 • MAIL TO: CME 2010 • 231 Front Street, Ste. 1 • South Portland, ME 04106