

GENERAL MOTORS SEMA DESIGN AWARD APPLICATION

PLEASE FILL OUT A SEPARATE FORM FOR EACH VEHICLE OR COMPONENT

COMPANY APPLYING FOR AWARD: _____

APPLICATION TYPE: VEHICLE (BRAND): _____ or COMPONENT: _____

YOUR ON-SITE CONTACT: NAME _____ CELL PH #: _____

BOOTH NUMBER: _____ DISPLAYER NAME: _____

LOCATION OF VEHICLE / COMPONENT:	<u>SECTION OF HALL</u>		
	WEST 1/3	CENTRAL	EAST 1/3
NORTH HALL	_____	_____	_____
CENTRAL HALL	_____	_____	_____
SOUTH HALL UPPER	_____	_____	_____
SOUTH HALL LOWER	_____	_____	_____

IF FEATURE VEHICLE SPOT: (CALL CELL # BELOW, ON SUN/MON WHEN KNOWN)

INSIDE: _____ (Use Grid Above, If Known)

OUTSIDE (Describe Area): _____

VEHICLE APPLICATIONS: BRIEF DESCRIPTION OF VEHICLE THEME _____

VEHICLE COLOR(S): _____, MODEL YEAR: _____

COMPONENT APPLICATIONS: BRIEF DESCRIPTION OF COMPONENT / SYSTEM

PLEASE CALL TO VERIFY RECEIPT OF APPLICATION: **313-300-9471 (mobile)**

ALSO USE THIS PH # TO LET ME KNOW FEATURE VEHICLE SPOT ON SUNDAY

APPLICATIONS DUE NO LATER THAN NOON WEDNESDAY, OCTOBER 24, 2012

Please fax back to me at: 313-667-5001 (preferred) or email to: rob_eagle22@yahoo.com

THANK YOU FOR SUBMITTING YOUR APPLICATION.

BOB KERN