



American Thoracic Society 2024 Conference TANKS OF COMPRESSED GAS

Please complete this form if you are bringing Tanks of Compressed Gas to the ATS 2024 Conference. Email completed form to Exhibition Operations at mwhyte@thoracic.org. *Certain contents will require a special permit from the Fire Marshal. If you are affected we will inform you upon receipt of this form.*

| | |
|------------------------|--|
| Exhibitor Name: | |
| Booth Number: | |
| Contact Info: | |
| Street Address | |
| City, State, Zip | |
| Phone/Fax/Email | |

| |
|--|
| Who is responsible for removing <u>all</u> the tanks (empty and full)? |
| Name: |
| Cell Phone: |

| Contents | Size | Number of Tanks |
|----------|------|-----------------|
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I agree all tanks will be labeled with the Exhibitors name, booth #, I&D house, and responsible party contact information. I also agree to remove all of the tanks at the conclusion of the Conference. (If the exhibitor fails to remove all tanks of compressed gas, the cost to dispose of the tank(s) is billed to the exhibitor at cost.)

Signature: _____ Date: _____