



CGTA WEB SITE

MEMBER/EXHIBITOR PASSWORD REQUEST FORM

As a security measure, new password requests for the CGTA Web site must originate from the primary contact for your company.

Please complete the form below:

NEW PASSWORD REQUEST **RESEND PASSWORD**

Company Name: _____

***Requestors Name:** _____

**Must be Primary/Exhibitor Contact*

Requestors Signature:

Name of Person Password is Requested For:

Please indicate below how you would like to receive your confidential password.

E-mail address: _____

Fax Number: _____

Please submit online or print and fax back to (416) 679-0175.

If you have any questions, contact the CGTA Web site department at

(416) 679-0170 or (800) 611-6100.

