

## Exhibitor Order Form

### Customer Information

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Ordered By: \_\_\_\_\_  
 Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_  
 Conference Attending: \_\_\_\_\_ Booth #: \_\_\_\_\_

Equipment	Qty	Daily Rate		Days Needed	Total
		Advanced	On Site		
Internet Connection		\$75.00	\$100.00		\$
21" LCD Monitor		\$100.00	\$150.00		\$
42" Plasma Monitor with stand and speakers		\$350.00	\$400.00		\$
52" LED Monitor with stand and speakers		\$450.00	\$500.00		\$
Standard Power – Exhibit Booth <i>(Extension Cord &amp; Power Strip)</i>		\$25.00	\$35.00		\$
Premium Power – Large Equipment <i>(60 Amp Power Box)</i>		\$150.00	\$200.00		\$

\*\*\*Other equipment available upon request\*\*\*

Delivery Information	Rental Totals	
Onsite Contact: _____	<b>Equipment Total</b>	1. \$ _____
Delivery Date: _____ / _____ / _____	<b>Service Charge (24% of line 1)</b>	2. \$ _____
Delivery Time: _____ : _____	<b>Subtotal (sum of line 1 &amp; 2)</b>	3. \$ _____
Pickup Date: _____ / _____ / _____	<b>Lodging Tax (8% of line 3)</b>	4. \$ _____
Pickup Time: _____ : _____	<b>TOTAL DUE</b>	5. \$ _____

### Method of Payment

Card Number: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Cardholder's Name \_\_\_\_\_ Exp: \_\_\_\_\_ / \_\_\_\_\_  
 Amex:  Visa  MasterCard

**For further information and services please contact the Director of Audio Visual.**

Ben Kent

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**Tax Exempt Status** – Please forward an exemption certificate for the state in which the services are to be provided.

**Cancellations:** To guarantee equipment availability and advanced rate, this order should reach us 14 days prior to delivery.

A) Cancellation of equipment ordered must be received 48 hours prior to delivery date to avoid a minimum one day charge.

B) If services have already been provided at the time of cancellation 100% of original charges will be applied.