



THE RITZ-CARLTON

FORT LAUDERDALE

Ritz-Carlton Fort Lauderdale
1 North Fort Lauderdale Beach Blvd.
Phone: 954-547-4186 Email: ataylor@psav.com
2019 Exhibitor Service Order Form

NAME OF CONFERENCE (REQUIRED FOR PROCESSING): BOOTH #:
COMPANY NAME: CONTACT NAME: PHONE: E-MAIL:
ADDRESS: CITY: STATE: ZIP:
SETUP DATE: TIME:
STRIKE DATE: TIME:
\*\*\* THERE IS A 25% EVENT TECHNOLOGY SUPPORT CHARGE ON ALL ORDERS
\*\*\*ADVANCED RATE APPLIES TO ALL ORDERS RECEIVED AND PAID FOR MORE THAN 7 DAYS BEFORE THE START OF EVENT

Table with columns for ELECTRICAL SERVICES and GENERAL AUDIO VISUAL. Includes rows for 120V, 20 AMP, 30 AMP, 24" MONITOR, 32" MONITOR, 46" MONITOR, 55" MONITOR, 70" MONITOR, 80" MONITOR, LAPTOP, 25' EXT CORD, POWER STRIP, and Belkin Station.

TERMS AND CONDITIONS
1) Pricing is per show and is subject to 25% Event Technology Support and 7% Sales Tax
2) Cancellation Policy: All cancellations must be submitted in writing. Cancellations received within 24 to 48 hours of the scheduled delivery date are subject to 50% charge of the order total. Cancellations received less than 24 hours or the day of scheduled delivery are subject to full charge.
3) Outlet rates listed include bringing the services to one location at the rear of the booth. PSAV Reserves the right to utilize all outlets within function space for exhibit events.
4) Standard wall and other permanent building utility outlets or sockets are not part of the booth space and may not be used by exhibitors unless electrical services have been ordered.
5) All equipment, regardless of the source of power, must comply with Federal, State, and Local codes. The Hotel reserves the right to

\*\*ALL PRICING IS FOR THE LENGTH OF THE SHOW\*\*

\*\*LABOR RATES WILL APPLY TO ALL ORDERS\*\*

SUMMARY OF CHARGES
ELECTRICAL SERVICES \$ -
HIGH SPEED INTERNET \$ -
AUDIO VISUAL EQUIPMENT \$ -
25% EVENT TECHNOLOGY SUPPORT \$ -
7% SALES TAX \$ -

	inspect all electrical devices and connections to ensure compliance with all codes.
6)	Payment in full must be received prior to the start of the event. Services may be interrupted if payment is not received.
7)	The Hotel is not responsible for any and all losses of power beyond the Hotel's control including but not limited to losses due to utility company failure, permanent power distribution failure, power failure caused by vandalism, or faulty exhibit equipment.
8)	By signing this form the exhibitor agrees to all terms and conditions outlined above.

<b>TOTAL</b>	\$ -
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Please call to provide credit card information for payment.

\_\_\_\_\_  
CLIENT SIGNATURE

\_\_\_\_\_  
DATE



**Credit Card Consent Form**

PSAV LOCATION NUMBER: \_\_\_\_\_ Property Name: \_\_\_\_\_

**Credit Card Type:** *American Express* \_\_\_\_\_ *Discover* \_\_\_\_\_ *MasterCard* \_\_\_\_\_ *Visa* \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Cardholder's Name:** \_\_\_\_\_

*(As it appears on credit card)*

**Cardholder Billing Address:** \_\_\_\_\_ **Zip Code (REQUIRED):** \_\_\_\_\_

*(Only numeric portion required)*

**Cardholder email address:** \_\_\_\_\_

**Cardholder's Phone Number:** \_\_\_\_\_

**Customer Name:** \_\_\_\_\_

*(Name as it should appear on the invoice)*

**Invoice/Order Number(s):** \_\_\_\_\_ **Customer PO:** \_\_\_\_\_

*(If a PO # is not provided use loc # and Order ID XXXX XXXX)*

I, (please print) \_\_\_\_\_, certify the above information to be true and correct to the best of my knowledge. As the cardholder, I am authorizing the above credit card account to be charged for the attached order and any additional amounts incurred as a result of all show site changes ordered by my representatives and/or place my card on file for Security Deposit purposes in the event of payment default, cancellation fees or damages/losses owed per PSAV Terms and Conditions – See Terms and Conditions.

Signature \_\_\_\_\_ Date \_\_\_\_\_