



LIGHTING SERVICE ORDER FORM

PLEASE PRINT OR TYPE: **Bolded** fields are required for processing.

NAME OF EVENT: **SAPPHIRE 2008 AND 2008 ASUG ANNUAL CONFERENCE** BOOTH: _____

BOOTH SIZE: _____ X _____ BOOTH TYPE: ISLAND INLINE PENINSULA

EXHIBITING COMPANY: _____ PHONE: _____ EXT. _____

ADDRESS: _____ FAX: _____

CITY: _____ STATE/PROVINCE: _____ ZIP: _____ COUNTRY: _____

AUTHORIZED PERSON: _____ EMAIL: _____

IF USING AN EXHIBIT HOUSE, PLEASE INDICATE CONTACT NAME & PHONE NUMBER BELOW:
CONTACT NAME: _____ PHONE: _____

EXPRESS MAIL TO: Orange County Convention Center	US MAIL TO: Orange County Convention Center
Attention: Exhibitor Services	Attention: Exhibitor Services
9860 Universal Blvd., Orlando, FL 32819-8199	PO BOX 691509, Orlando, FL 32869-1509
Fax (407) 685-9884	
Convention Center (800) 345-9898 • Exhibit Services (407) 685-9824	
E-MAIL: exhibit.services@occc.net WEB: http://www.occc.net/exhibitor/default.asp	

Track Lights	PRIOR TO OR ON APRIL 7, 2008			AFTER APRIL 7, 2008 TO ONSITE					
Quantity	Cost	Sales Tax	Unit Total	Cost	Sales Tax	Unit Total	TOTAL		
4' Track with 2 lights*	168.36	+	10.95	179.31	270.61	+	17.59	288.20	\$
4' Track with 3 lights*	196.24	+	12.76	209.00	315.02	+	20.48	335.50	\$
4' Track with 4 lights*	222.07	+	14.44	235.51	356.33	+	23.17	379.50	\$
Add'l Track Light Fixtures*	55.76	+	3.63	59.39	88.81	+	5.78	94.59	\$
300 Watt Pole Light**	87.79	+	5.71	93.50	140.47	+	9.13	149.60	\$

*Price includes: fixtures, maintenance, power, installation, removal and metal bar for placement in your booth (Please see reverse side).

** Includes Power and Installation

ADDITIONAL OVERHEAD LIGHTING (Pricing is per event)

Quantity	Cost	Tax	Unit Total	Cost	Tax	Unit Total	TOTAL		
Par Can**	266.48	+	17.33	283.81	399.73	+	25.99	425.72	\$
Lights Out (Per Pod)	Requires Show Mgmt Approval \$55.00			Requires Show Mgmt Approval \$74.25			\$		

++ (1000 watt Theatrical Ceiling Light Includes Installation, Removal, Electric, and 1 Focus

- If refocus is required, an additional labor charge will apply.
- Please attach blueprints, floor plans, booth diagrams, sketches or drawings with surrounding booth or aisle numbers in order to determine proper orientation of your booth and the location of par cans and/or track or pole lights.
- **ALL PAYMENTS MUST BE MADE IN FULL by check, cash, money order or credit card, payable in US dollars, before services are provided.**

Payment in full must be received before service is provided.

Orange County Convention Center Taxpayer Identification Number (TIN) is 59-6000773.

FORM OF PAYMENT: Remit to Orange County Convention Center. NEW ONSITE ORDERS are subject to 50% Increase over the Base Rate.

Company Check or Money Order in the amount of \$ _____ Visa MasterCard American Express

(Made Payable to Orange County Convention Center, \$USD, US Bank)

Please complete all areas below. Incomplete requests will be rejected. The Center reserves the right to decline acceptance of any card-not-present credit card transaction at its discretion. Please note that we will be contacting your bank to verify that you are able to make these charges.

Account No. _____ Exp. Date _____

Name (Please Print) _____

Authorized Signature _____ Date _____

Credit Card Billing Address: _____

Security ID Code: _____

FOR OFFICE USE ONLY

Cancellation Policy: Notification of cancellation must be received in writing a minimum of fourteen (14) days prior to the scheduled first move in date to receive a full refund less \$35.00 administrative fee.

ALL PRICES ARE SUBJECT TO CHANGE WITHOUT NOTICE.