

Murfreesboro - Hotel & Conference Center 1200 Conference Ctr Blvd, Murfreesboro, TN 37129 615-890-4464

### **Exhibitor Service Order Form**

Our Catering Services Department is here to assist you with your exhibit needs. Please fill out the following 2 forms to ensure proper billing and set-up. If you are shipping materials directly to the Hotel, please use the shipping information on page 3.

Date of Function:		Event Name:  Number of Days:			
					_
Contact Inform	nation:				
Guest Name: Street Address:		Company: City, State, Zip Code:			
Telep	Telephone Number:		Fax Number:		
	I Address:				
*All charges	s/rentals are calculated per day				
Electrical Serv				<b>,</b>	
# Ordered	Description	Advance Order	Floor Order	# of Days	Total Amount
	1 – Dedicated 110V 20A Outlet (Standard Outlet)	\$35.00	\$50.00		
	1 – 208 Single Phase 30A Circuit	\$75.00	\$100.00		
	1 – Electrical Hook-Up Fee per 100A	\$125.00	\$175.00		
	1 – Multi-Tap Power Strip with Extension Cord	\$20.00	\$30.00		
	ction for power and lights only; no other use authon Id/or power columns are not part of the rental space		hibitor use.		
Internet Servic	e:				
# Ordered	Description	Advance Order	Floor Order	# of Days	Total Amount
	Wireless Internet Connection	\$10.00	\$15.00	•	
	Wired High Speed Data Connection	\$150.00	\$175.00		
	AV Tech – 2 Hour Min. – Priced per Hour	\$75.00	\$100.00		
AV Service:					
# Ordered	Description	Advance Order	Floor Order	# of Days	Total Amount
	21" LCD Display	\$75.00	\$100.00		
	45" LCD Screen with Floor Stand	\$250.00	\$350.00		
	55" LCD Screen with Floor Stand	\$300.00	\$400.00		
	Laptop Audio – D.I. Box and Mixer	\$90.00	\$125.00		
	5500 Lumen LCD Projector	\$350.00	\$450.00		
Shipping:	tems available by request. Call (615) 215-542			Total Amount	1
# Ordered	Description 4 Page 12 All 12 A	Advance Order \$10.00	Floor Order \$10.00	Total Amount	1
	1 – Box Receipt and Storage - up to 36" x 24" x	φ10.00	φ10.00		
	24"				
	1 – Box Receipt and Storage - Larger boxes /	\$25	\$25		
	display cases				
	Prior to 72 Hours of Event Start (Additional)	\$5.00	\$5.00		1
	1 - Pallet/Package +250 lbs. Receipt and Storage	\$100.00	\$100.00		
	Prior to 72 Hours of Event Start (Additional)	\$50.00	\$50.00		
Special Instructi					-
opeciai Instructi	ions:				
Order Authorize					
	Signature		Departm	ient	



## **Credit Card Payment Authorization Form**

Please complete all cardholder areas below and submit the <u>signed and dated</u> form to the FAX number listed below. **Do not send the completed form by Email.** 

This form must be received at least five (5) days prior to Check-In, or by the data specified within the event contract, to ensure that the credit card is accepted and approved.

Please Fax Completed Form To:	(615) 216-5440	Attention:	Accounting Office			
For Hotel Use Only:						
Authorized Amount:	Approval Code	::	Date:			
Cardholder: Please complete the	he following section. Sign and date	e at the bottom of this fo	m.			
Guest / Group Name:		Check-l	Check-In / Event Date:			
Name of Person Making Reserv	vation:	Phone:				
Cardholder Name Exactly as it	Appears on the Credit Card:					
Cardholder Billing Address:						
Daytime / Business Phone:		Evening Phone:				
Credit Card Type: (Circle One) Visa MasterCa	rd American Express	Discover	JCB	Diners Club		
Credit Card Number:		Expirati	on Date:			
Credit Card Issuing Bank Name	c	Phone:				
All Charges Room & Tax	ne following categories of charges: Food & Beverage Catering a Services Spa Retail Recreat	Liquor Paid Movies	Valet Parking	Standard Parking e Federal Express		
l agree to cover, and pay for, th	he above categories of charges up	to a Maximum Amount o	f:			
rect Bill Account Payments On	ly:					
Name on Invoice / Statement:	Date on Invoice / Statement:					
Invoice / Statement Number:	Authorized Amount: \$					
ote: Charges for room and tax	, group deposits or direct bill acc	ount payments will be o	:harged to your c	redit card immedia		
,	bove will be charged at the time					
	ed to credit card for room and taxes					
	ard (hotel use only): \$					
mount" listed above. You furthe	ne hotel to charge your credit card r acknowledge that if "all charges" ove card number at the time of Cho	has been selected, then a	II guest / group re			
ardholder Signature:		Date:				



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## **Package Shipment Information**

All packages should be shipped and INDIVIDUALLY labeled to the hotel with the following information:

# EMBASSY SUITES NASHVILLE SE MURFREESBORO GROUP OR SHOW NAME

ATTENTION: Registered Guest Name/Group On-Site Contact and Group Arrival Date 1200 CONFERENCE CENTER BOULEVARD MURFREESBORO, TN 37129

### Multiple boxes/containers should each be marked as follows:

"(Box number) of (total number shipped)." For example: Box 1 of 2, Box 2 of 2

### **Shipping Policies:**

- 1) All packages sent should be labeled as listed above.
- 2) The hotel will only accept shipments on the preceding three (3) days before the event (see Exhibitor Order Form for pricing on earlier delivery).
- 3) Upon receipt of the Exhibitor Order Form, listing amount of boxes and/or pallets, hotel will provide delivery to the event location on the date of setup.
  - Group Representatives/Exhibitors will sign for all shipments and are responsible for all unpacking and setup of exhibit items.
- 4) At the conclusion of the show, the Group Representative/Exhibitors will be responsible for all dismantling, repacking and sealing of outbound shipments.
- 5) All outbound shipments will require completed shipping documents, including billing account numbers. Client must set up pickup with designated shipping vendor.
- 6) Hotel cannot accept any C.O.D. shipments.

### **Incoming Shipping Charges:**

(Charge includes receiving, storage & handling)