

# EXHIBITOR SERVICES

Create the ultimate brand experience with a sensory-rich environment that drives attendee interest.



**Sheraton**

ATLANTA HOTEL

NAME OF CONFERENCE		START DATE	END DATE	NO. OF EVENT DAYS
ORGANIZATION NAME		ON-SITE CONTACT NAME		ROOM/EXHIBIT BOOTH NO.
STREET ADDRESS		CITY	STATE	ZIP CODE
TELEPHONE NUMBER	DELIVERY DATE	DELIVERY TIME <input type="checkbox"/> AM <input type="checkbox"/> PM	PICKUP DATE	PICKUP TIME <input type="checkbox"/> AM <input type="checkbox"/> PM
EMAIL ADDRESS		ORDERED BY		

**ORDERING INSTRUCTIONS:** To guarantee equipment availability and advanced-rate pricing, place your order at least 21 days prior to delivery. Prices are for exhibit floor only. All rental prices subject to a 15% markup if ordered day of. Operator labor, if requested, is subject to the prevailing hourly rate with a four-hour minimum. An electronic receipt will be emailed to you. The total charge per item is determined by multiplying the price by the quantity ordered by the days rented. Please include applicable Sales Tax on equipment rental.

## PSAV WILL CONTACT YOU DIRECTLY FOR PAYMENT INFORMATION. PRICING IS PER DAY.

**Tax Exempt Status** – If you are exempt from payment of sales tax, we require you to forward an exemption certificate for the state in which the services are to be provided.

**Cancellations** – Cancellations received within 48 hours of the scheduled delivery date are subject to a 50 percent fee applicable to equipment and tax. Cancellations received on the day of scheduled delivery or “no shows” are subject to the full amount of the order, including installation, drayage and tax. Labor and/or service charges may apply and/or loss damage waiver.

**Shipping Instructions** – Mark any materials sent to the venue as follows:

1. Address Packages to: Sheraton Atlanta Hotel, 165 Courtland Street NE, Atlanta, GA 30303
2. Hold for Arrival - Attn: Guest's Name and/or Organization
3. Complete Return Address
4. Number of Boxes (ex: Box 1 of 2, Box 2 of 2)

**Form Submission** – Email completed forms to: [javery@psav.com](mailto:javery@psav.com).

### MONITORS

	PRICE	QTY	DAYS	TOTAL
22" Multi sync monitor	\$ 210			\$ 0
55" LCD monitor	\$ 655			\$ 0
Dual-post stand				
70" LCD monitor				
Dual-post stand				

Please contact PSAV for quote

### AUDIO EQUIPMENT

	PRICE	QTY	DAYS	TOTAL
Laptop sound port	\$ 62			\$ 0
Wired handheld microphone	\$ 62			\$ 0
Wireless microphone	\$ 190			\$ 0
Handheld Lavalier				
Wireless headset microphone	\$ 78			\$ 0
Requires wireless microphone unit to operate				
Powered speaker	\$ 110			\$ 0
Up to five people				
Sound system	\$ 405			\$ 0
two speakers, two stands, one mixer, one wired microphone				
up to 20 people				
4-channel mixer	\$ 68			\$ 0

### ACCESSORIES

	PRICE	QTY	DAYS	TOTAL
Laptop	\$ 220			\$ 0

### INTERNET

	PRICE	QTY	DAYS	TOTAL
Wired internet connection	\$ 170			\$ 0
Wireless internet connection	\$ 17			\$ 0
Dedicated bandwidth				

Please contact PSAV for quote

### LIGHTING

	PRICE	QTY	DAYS	TOTAL
Up-light	\$ 75			\$ 0

### POWER

	PRICE	QTY	DAYS	TOTAL
208V Single Phase – 20 AMP	\$ 140			\$ 0
208V Single Phase – 60 AMP	\$ 180			\$ 0
208V Single Phase – 100 AMP	\$ 385			\$ 0
208V Three Phase – 60 AMP	\$ 465			\$ 0
208V Three Phase – 100 AMP	\$ 760			\$ 0
208V Three Phase – 200 AMP	\$ 1,540			\$ 0
AC Power distro 60 Amp – 110 V	\$ 165			\$ 0
AC Power distro 60 Amp – 208 V	\$ 190			\$ 0
AC Power distro 100 Amp – 120 V	\$ 220			\$ 0
AC Power distro 200 Amp – 208 V	\$ 360			\$ 0
25' AC cable	\$ 21			\$ 0
Power strip	\$ 21			\$ 0

Power Distribution Setup/Strike is \$90 per hour

### RIGGING

All rigging requests should be placed using the Rigging Request Form.

### CUSTOM ITEMS

	PRICE	QTY	DAYS	TOTAL
	\$			\$ 0
	\$			\$ 0
	\$			\$ 0
	\$			\$ 0
	\$			\$ 0

### SPECIAL REQUESTS

Please add any items not listed above that you require.

**PSAV® Representative**

Sheraton Atlanta Hotel

165 Courtland Street NE, Atlanta, GA 30303

office: 404.614.8185

email: [javery@psav.com](mailto:javery@psav.com)





**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 \_\_\_\_\_