2012 CABLE SERVICE ORDER FORM

Orange County Convention Center
The Center of Hospitality, where it's all about *your* experience.
Orlando

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

NAME OF EVENT: Star Wars Celebration VI **BOOTH:**_____

BOOTH SIZE: _____X_____ **BOOTH TYPE:** ❑ ISLAND ❑ INLINE ❑ PENINSULA

EXHIBITING COMPANY: _____**PHONE:** _____**FAX:**_____

ADDRESS: _____**EMAIL:** _____

CITY: _____STATE/PROVINCE:_____ ZIP:_____ COUNTRY: _____

ARE YOU: ❑Exhibitor ❑EAC / I & D (Company Name) _____ ❑Other_____

IF USING AN EAC / I & D COMPANY, PLEASE INDICATE CONTACT INFORMATION BELOW:
CONTACT NAME: _____ PHONE:_____EXT.____ EMAIL: _____

***EXPRESS MAIL TO*: Orange County Convention Center**
Attention: Exhibitor Services
9860 Universal Blvd., Orlando, FL 32819-8199

***US MAIL TO:* Orange County Convention Center**
Attention: Exhibitor Services
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

Quantity	*Incentive Order With Payment Before August 6, 2012			**Base Order With Payment After August 6, 2012			TOTAL
	Cost	CST Tax	Unit Total	Cost	CST Tax	Unit Total	
____ Standard Line Up	$249.88	$36.12	$286.00	$314.54	$45.46	$360.00	$
____ *HDTV	$327.65	$47.35	$375.00	$413.28	$59.88	$473.00	$
____ Add'l HDTV/Digital Box & Remote	$170.38	$24.62	$195.00	$218.44	$31.56	$250.00	$
____ Refundable Deposit for Box			$300.00			$300.00	$
						GRAND TOTAL	**$**

**All HDTV equipment must be returned to Exhibitor Services Desk at show close. Unreturned equipment is subject to a $300.00 replacement fee.*

A television/monitor is not supplied. Rate includes labor, infrastructure patch fee. Cable service is provided by Brighthouse Networks. The rate is per show. See page 2 for channel lineup.

For exact placement, attach a scaled diagram indicating the location of cable service, including booth number and surrounding aisle numbers for orientation.

If drawing is not provided, the center will install the service in the most convenient location and charges will apply for relocation. **Labor charges will apply for service calls**.

All payments must be made in full by check, cash, money order or credit card, payable in us dollars, before services are provided.

All prices are subject to change without notice.

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.
❑ 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.

Security ID Code:_____

Account No. _____Exp. Date_____

Name (Please Print)_____

Authorized Signature _____ Date_____

E-mail Address to where final invoice will be sent: _____

Credit Card Billing Address: _____

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

FOR OFFICE USE ONLY