



EXHIBITOR AGREEMENT

Name of Conference:	Event Date(s):	Booth #
Company Name:	Onsite Contact Name:	Telephone Number:
Address:	City & State:	Zip Code:
Start Date:	Set By Time:	Email Address:
End Date:	Strike by Time:	Ordered by:

PLEASE SUBMIT NO LATER THAN 14 DAYS PRIOR TO EVENT

ELECTRICAL NEEDS		
DESCRIPTION	USAGE PRICE PER DAY	QTY
Multi Outlet Strip (does not include power)	\$5	
<u>Single Phase</u> Outlets to 20 amps, 120 volts	\$25	
<u>Single Phase</u> Outlets to 20 amps, 208 volts	\$25	

INTERNET & AUDIO VISUAL		
PSAV	USAGE PRICE PER DAY	QTY
HSIA Wired	\$166.78 per devise	
HSIA Wireless	\$43.23 per devise	

PLEASE CONTACT HOTEL FOR SPECIAL CIRCUITS

PSAV Rep: Robert Rapatski rrapatski@psav.com

Total: _____

PAYMENT INFORMATION

Check Payment:
 Mail completed form to:
 Doubletree by Hilton Burlington
 870 Williston Road
 So Burlington, VT 05403

Credit Card Payment:
 E-mail completed form to sherri.neumann@hilton.com
 Or fax to 802.865.6617
 A representative will contact you directly to obtain your credit card information.

SIGNATURE: _____ DATE: _____