



Exhibitor Request Form

Submit electronically: bsurtin@psav.com

Fax to: (314) 342-4686

Mail to: **PSAV Presentation Services**
Hyatt Regency St. Louis at The Arch
315 Chestnut, St. Louis, MO 63102

EQUIPMENT	QTY.	COST FOR DURATION OF SHOW	TOTAL (Qty X Cost)
-----------	------	---------------------------	--------------------

COMPUTER/VIDEO MONITORS

20" LCD on Table Stand (PC Input Only)
 32" LCD HDTV on Rolling Stand (HDMI, PC, Component, Composite)
 42" Plasma on Rolling Stand (PC, Composite)
 50" Plasma on Rolling Stand (PC, Composite)
 Audio Add-On for above Monitor Rental checkmark this box for audio ->

	\$465	
	\$665	
	\$765	
	\$865	
	Free	

AUDIO EQUIPMENT

Computer Speakers (Pair)
 Small PA system with Wireless Microphone *Please Choose ... (Lavalier / Handheld)*

	\$160	
	\$550	

MISCELLANEOUS

Standard Electrical Connection (120V / 20 Amp)
 Power Strip
 Extension Cord
 Undedicated Wireless Internet (3 devices)
 (1) Undedicated Wired Internet Connection
 Laptop Computer
 DVD Player
 Customized Internet, Expanded Power, or Phone Options

	\$95	
	\$20	
	\$30	
	\$250	
	\$500	
	\$300	
	\$100	
	contact for quote	

NOTE:
 This is only a partial listing. All pricing is for exhibit booths only. Please contact us for meeting room pricing. Additional equipment is available upon request. All prices are for the entire event, per day rates do not apply.

Delivery, Installation, Pre-Test, Removal & Pickup included above
Late Fee (for orders received within 72 hours of show) Pending availability of equipment **\$30**

Subtotal

Taxes will be included once the order is received. A final receipt with tax will be emailed for your records.

TOTAL

EXHIBITOR INFORMATION (Please PRINT)

NAME OF EVENT OR CONFERENCE

COMPANY NAME BOOTH #

ATTENTION ON-SITE CONTACT

ADDRESS ORDERED BY

CITY, STATE, ZIP

PHONE # FAX #

E-MAIL ADDRESS

SHOW OPENING DATE TIME

EQUIPMENT REMOVAL DATE TIME

● The customer agrees to pay in full for loss or theft of any equipment provided by PSAV Presentation Services.
 ● Pre-payment must accompany all orders unless prior arrangements have been made.

PAYMENT INFORMATION

Visa		Mastercard	
AmEx		Discover	
Check Enclosed (Payable to PSAV)		Confirmation # (PSAV Use)	

CARD HOLDER'S NAME (Please Print)

CREDIT CARD NUMBER

EXPIRATION DATE ZIP CODE

SIGNATURE DATE