

LANCASTER COUNTY

CONVENTION CENTER

Electrical, Internet & Service Order Form
 Mail or fax to: Convention Services Manager
 3 East Vine Street
 Lancaster, PA 17602
 717.239.1600 (phone) 717.207.4028 (fax)

SHOW NAME: _____ BOOTH # _____

COMPANY NAME: _____ PHONE # _____

SHOW DATES: _____ AUTHORIZED BY: _____

IMPORTANT INFORMATION:

1. ALL electrical charges must be pre-paid prior to services rendered by filling out this form or check payable to the Lancaster County Convention Center.
2. We must receive the order no later than 7 days prior to set up or a \$20 late charge will apply.
3. Prices are subject to change without notice.

	# Needed	Cost per line	# of Days	Total Fee
<u>120 Volts</u>				
15 AMPS		\$50/day		
20 AMPS		\$75/day		
30 AMPS		\$95/day		
<u>208 Volts Single Phase</u>				
30 AMPS		\$150/day		
60 AMPS		\$225/day		
100 AMPS		\$500/day		
200 AMPS		\$650/day		
<u>480 Volts</u>				
100 AMPS		\$500/day		
200 AMPS		\$750/day		
Extension Cords		\$20		
Power Strips		\$25		
Electrician		\$40 hr		
Standard or Direct Analog Phone Line		\$150		
Internet (wired or wireless)		\$150/day		
Each Addn'l Line		\$50/day		
<u>Total</u>				
<u>Add 21% Service Charge</u>				
<u>Add 6% sales Tax</u>				
GRAND TOTAL				

Cardholder Information

Name as it appears on the credit card: _____

Card type: Visa MC Amex Diners/CB Discover JCB

Account type: Individual (personal credit card)

Corporate | Company Name: _____

Credit Card Account Number: _____ Exp. date: _____

Phone number: _____ Fax or alternate number: _____

I certify that all information is complete and accurate. I hereby authorize **Lancaster County Convention Center** to collect payment for all authorized charges associated with this event by processing a charge to the credit card listed above. I certify that I am the authorized signer of the credit card listed above.

Cardholder name:
(Printed) _____

Cardholder signature: _____ Date: _____