BOOTH VACUUMING & SHAMPOOING REQUEST 2011

This form is your official invoice – please keep a copy for your records
All Prices Subject to Applicable Taxes
All Prices Subject to Change Without Notice

EVENT #: 24750

EVENT INFORMATION:

EVENT NAME: **PACIFIC DENTAL CONFERENCE 2012** BOOTH NUMBER:

EVENT DATES: **MARCH 8-9, 2012**

DATES VACUUMING REQUIRED: _____

CUSTOMER INFORMATION:

COMPANY NAME: _____

COMPANY ADDRESS: _____

Street City Province/State Postal/Zip Code

CONTACT NAME: _____ TELEPHONE #: ( ) _____

E-MAIL: _____ FAX #: ( ) _____

BOOTH CARPET VACUUMING – EXHIBIT BOOTHS 200 SQ. FT. (10' X 20') OR UNDER

	NUMBER OF DAYS		UNIT AMOUNT		TOTAL AMOUNT	Vancouver Convention Centre Use Only
❑ DISCOUNT RATE UP TO **7** DAYS PRIOR TO MOVE-IN.	_____	X	$ 20.00	=	_____	
❑ STANDARD RATE UNDER **7** DAYS PRIOR TO MOVE-IN.	_____	X	$ 29.00	=	_____	

BOOTH CARPET VACUUMING – EXHIBIT BOOTHS OVER 200 SQ. FT.

	TOTAL Square Feet		NUMBER OF DAYS		UNIT AMOUNT		TOTAL AMOUNT	Vancouver Convention Centre Use Only
❑ DISCOUNT RATE UP TO **7** DAYS PRIOR TO MOVE-IN.	_____	X	_____	X	$ 0.18	=	_____	
❑ STANDARD RATE UNDER **7** DAYS PRIOR TO MOVE-IN.	_____	X	_____	X	$ 0.25	=	_____	

BOOTH CARPET SHAMPOOING

	TOTAL Square Feet		NUMBER OF DAYS		UNIT AMOUNT		TOTAL AMOUNT	Vancouver Convention Centre Use Only
❑ DISCOUNT RATE UP TO **7** DAYS PRIOR TO MOVE-IN. **MINIMUM $35.00 PER BOOTH/SHAMPOO**	_____	X	_____	X	$ 0.24	=	_____	
❑ STANDARD RATE UNDER **7** DAYS PRIOR TO MOVE-IN. **MINIMUM $35.00 PER BOOTH/SHAMPOO**	_____	X	_____	X	$ 0.29	=	_____	

PAYMENT INFORMATION:

Make Cheques Payable to:

Vancouver Convention Centre
1055 Canada Place
Vancouver, B.C. Canada
V6C 0C3

To fax your form or for further inquiries:
Call (604) 647-7206
Fax (604) 647-7325

Discount Rate applicable up to 7 days prior to move-in date. Make all payments in Canadian Funds. All orders must be accompanied by payment.

SUB TOTAL	
12% HST (#R100432764)	
TOTAL CANADIAN	

❑ Cash ❑ Cheque ❑ Money Order

❑ Visa ❑ MasterCard ❑ American Express ❑ Bank Wire Transfer (Add $10.00 Service Charge to total) _____

Credit Card Number: _____ Expiry Date: _____

Print Name as it Appears on Card: _____

I hereby authorize the Vancouver Convention Centre or its agents to perform the service(s) described above and agree to assume complete responsibility for all charges for service.

Authorized Signature: _____ _____
Print Name and Title of Authorized Representative