



THE RITZ-CARLTON®
Washington, D.C.

1150 22nd Street, N.W.
Washington, D.C. 20037
(202) 835-0500

EXHIBITOR ORDER FORM

Instructions: Please complete the following Order Form and the attached Credit Card Authorization Form

Please Type or Print

Name _____

Company Name _____

Exhibiting with: NESPS

Onsite Contact: _____

Phone # (____) _____ - _____ Fax # (____) _____ - _____

Email Address _____

Electrical Equipment	Unit Price	# Of Units	Cost/Day
Extension Cord/Powerstrip	\$40.00 X		\$
Audio Visual **(Please add a 22% taxable surcharge)			
**DID Direct Dial (local & long distance calling) (All calls are at an additional fee and billed after the event.)	\$150.00 X		\$
Wired High Speed Internet Access – (one line)	\$150.00 X		\$
Wireless High Speed Internet Access	\$150.00 X		
Booth Set-Up			
	Please circle one:	Table Top	Free Standing
Please Insure Your Booth Complies With Show Regulations			
Flowers (Larger arrangements available. Call for pricing.)	Varies		\$
Easel	\$15.00 X		
Bulletin Board	\$25.00 X		
Large Bowl for Business Cards			No Cost
Ice Water and Glasses			No Cost
Box Delivery Fee	\$3.00 per box X	(Estimated # of boxes)	

Additional Equipment Can Be Ordered At An Additional Charge. Please Contact Your Meetings & Special Events Manager For Pricing.

Additional surcharges when applicable	\$
6.0% TAX	\$
Total Charges Due	\$

Orders will not be accepted unless all information is complete, the order signed dated, and the attached credit card authorization form completed. Cancellations must be received in writing forty eight (48) hours prior show set-up.

Return completed forms to
Christopher Lawing, Director of Meetings & Special Events at
chris.lawing@ritzcarlton.com or (202) 974-5538 no later than March 10, 2010.



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This form has been created in order to allow you to have third party expenses charged to your credit card. Please provide all the information requested below to ensure prompt processing of your application

Exhibitor 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: _____

Account number: _____ Exp. date: _____

Address: _____
(where statement is mailed)

City, State and Zip: _____

Phone number: _____ Fax/Alternate number: _____

On-Site Guest Information

Guest name: _____

Phone number: _____ Fax/Alternate number: _____

Relation to cardholder: Relative Friend Business Associate Other : _____

Approved Charges

X All Charges for Exhibit Booth Requirements Noted on Form

I certify that all information is complete and accurate. I hereby authorize The Ritz-Carlton, Washington, D.C., to collect payment for all charges as indicated in the Approved Charges section of this form 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: _____