

# Equipment Rental Form

WI State Hunting Expo | February 23-25, 2018

Company Name:

Booth Number:

Company Representative:

Title:

Email:

Phone:

Address:

City:

State:

Zip Code:

Website:

## EQUIPMENT RENTAL \*Advance Rates End 2/14/18

Quantity	*Item	Advance (Before 2/14/18)	Standard (After 2/14/18)	Total Due
	Carpet 9'x10' (Black or Gray)	\$42.00	\$69.00	
	Plain 3'x8' Table	\$21.25	\$36.50	
	Skirted 3'x8' Table (Black, White or Green)	\$42.00	\$63.00	
	Chair	\$5.25	\$10.50	
	110v Power Hook-Up (per plug)	\$47.50	\$79.00	
	Phone Line (Credit Card)	\$169.00	\$210.00	
	Vacuuming (per show, per section)	\$33.00	\$42.00	
Order Total : *Sales tax has already been included with all equipment orders.				\$ _____

NOTE: If you are ordering carpet and/or a skirted table, please make sure to select the color from the options listed.

### EQUIPMENT RENTAL CONTACT INFORMATION AND PAYMENT

Jessica Uecker  
920-405-1163  
Jessica.Uecker@pmiwi.com

### PAYMENT INFORMATION

TOTAL DUE \$ \_\_\_\_\_

Payment Type: Credit Card      Check

\* Credit Card Form on Page 2

Authorized Signature:  
\_\_\_\_\_

Mail or fax this form and Payment Information to:  
PMI Entertainment Group Expo & Event Production  
1901 S. Oneida St. Green Bay WI 54304 Fax: 920.494.6868

**PMI**  
**ENTERTAINMENT**  
**group**

# PMI Entertainment Group 2017 - 2018



## Payment Authorization Form

I hereby authorize PMI Entertainment Group to make payment toward the cost of my 2017/2018 exhibit space and other incidentals (admission passes, parking access, etc...).

Company Name: \_\_\_\_\_

D/B/A Name: \_\_\_\_\_ Booth/Space No.: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip: \_\_\_\_\_

Please make this payment using the following:

Visa  MasterCard  Discover  American Express

Card Number:

Expiration:   /   Security Code:

Amount to Charge: \_\_\_\_\_ \$

Name on card and authorized signor: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I agree to pay the above total amount according to the card issuer agreement. I hereby authorize recurring charges, if necessary, to initiate adjustments or correct errors. I certify that I am the authorized holder and signor of the credit card reference above. I certify that all information and statements above are accurate to the best of my knowledge.

**Please complete this form and mail or fax to:**

PMI Entertainment Group  
1901 S. Oneida Steet  
Green Bay WI 54304

Fax: 920-494-6868  
Intl Fax: +1 920-494-6868

**PLEASE DO NOT EMAIL CREDIT CARD INFORMATION.**  
**Email is not secure and places your card information at risk.**  
**Thank you.**  
**You may fax to 920-494-6868 or call the event coordinator to process the payment over the phone.**