



EXHIBITORS/VENDORS FORM

Terms of Service: **PLEASE FAX TO GROUP CONTACT, NOT WYNDHAM GETTYSBURG**

The Wyndham Gettysburg has provided this document in order to assist with equipment and service requests for your use during your scheduled function time. In order to service you properly, please read the form in its entirety, select the services as needed, verify form of payment and submit fourteen (14) days prior to your event start date to your group contact. Forms received after ten (10) business days may be subject to additional service charges up to 10% of the listed item price or possibly unavailable. All items and services are subject to a taxable 19% service charge and 6% state tax. Please contact the Wyndham Gettysburg at (717) 339-0020 with questions or custom packages. **** PLEASE FAX THIS REQUEST DIRECTLY TO YOUR CONFERENCE CONTACT, NOT TO WYNDHAM GETTYSBURG.****

INSTRUCTIONS TO GROUP CONTACT: Please compile all vendor request forms received and mail or fax in a single bulk shipment a minimum of 10 business days prior to the scheduled vendor show start date to Wyndham Gettysburg at 95 Presidential Circle, Gettysburg, PA 17325 or (717) 334-0456. Wyndham Gettysburg will be responsible for charging individual vendors applicable costs based on requested AV/Communication items when request forms are received. Please ensure a form of payment is noted on each vendor request form prior to sending to Wyndham Gettysburg.

PLEASE COMPLETE (Highlighted Areas)

Event Name:
 Event Start Date:
 Event End Date:

Your Company Name:
 Contact Name:
 Service Start Date:
 Service End Date:
 Telephone #:
 Email Address:
 Mailing Address:

BOOTH # **Group Contacts: Please Assign Booth Number Prior to Sending Forms to Wyndham Gettysburg**

ELECTRICAL (Please fill in)

Item/Service	Fee	x	Quantity	x # of Days	Total
120 volt 20amp circuit	\$25.00				\$0.00
Quad Box	\$150.00				\$0.00
Power Strip	\$10.00				\$0.00
Electrical Extension Cord	\$10.00				\$0.00
Sub-Total					\$0.00

Communication (Please fill in)

Item/Service	Fee	x	Quantity	x # of Days	Total
Phone Line (Direct Dial)	\$150.00				\$0.00
Telephone	\$50.00				\$0.00
Polycom Soundstation	\$95.00				\$0.00
Wired Internet Connection	\$100.00				\$0.00
Sub-Total					\$0.00

Audio Visual (Please fill in)

Item/Service	Fee	x	Quantity	x # of Days	Total
LCD Projector & Screen Package	\$320.00				\$0.00
Super VHS & Monitor	\$115.00				\$0.00
DVD & Monitor	\$115.00				\$0.00
19" Flat Panel Data Monitor	\$60.00				\$0.00
Flip Chart with Pad & Markers	\$30.00				\$0.00
Easel	\$15.00				\$0.00
Masking Tape (For Purchase)	\$2.00				\$0.00
Pipe & Drape	Call				\$0.00
Sub-Total					\$0.00

Sum of All	\$0.00
19% Service Charge	\$0.00
6% PA State Tax	\$0.00
TOTAL OF ALL	\$0.00

Form of Payment

Cash Amount: Check #: Amount:
 Credit Card Type: Credit Card #:
 Expiration Date:

By signing below I authorize the services, charges, and payments as stated in this form. I understand that services are limited to date of request(s) and equipment/service availability.

Signature of authorization:
 Date of authorization: