GREATER PHILADELPHIA EXPO CENTER

P.O. BOX 835
OAKS, PA 19456
484-754-EXPO

TELEPHONE SERVICE APPLICATION

Telephone service will be provided at the following rates:

$150.00	per telephone line for advanced orders (received 14 days prior to arrival)
$200.00	per telephone line for late orders
$100.00	for each additional telephone line

These prices include the following:

*One standard telephone line
*One Princess type touch tone phone instrument
*Touch tone service
*One 25' cord

Call use will be monitored throughout the rental period.

An invoice will be mailed after the close of the event.

All local and long distance calls and other services will be billed at the prevailing rate.

All 800 calls will be billed $.50 per call.

- **All outgoing calls must be dialed with "9" then area code + number**

At least 14 days notice will be required for installation.

A $25.00 fee will be charged if the telephone instrument is not returned at the end of the event.

*****NO TELEPHONE WILL BE INSTALLED UNLESS CREDIT CARD INFORMATION IS FILLED IN BELOW.*****
PLEASE PRINT – DO NOT WRITE

COMPANY: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE #: _____ FAX #: _____

NO. OF INDIVIDUAL LINES: _____ NO. OF TELEPHONE INSTRUMENTS: _____

SHOW NAME: _____ SHOW DATE: _____

BOOTH NUMBER REQUIRING TELEPHONE LINE: _____

REPRESENTATIVE NAME: _____ DATE: _____

_____ X $150.00 advance order first line

_____ X $200.00 late order first line

_____ X $100.00 each additional line

_____ SUBTOTAL

_____ 6% SALES TAX

_____ TOTAL RENTAL DUE

SERVICE FEES:
I understand that a service fee will be charged for the following:

1-800 Calls	$.50	Operator Assisted Calls (0 Plus)	$.75
Local Calls	.50	Other Carrier Access (Sprint, MCI)	.50
Local Directory	.50	Long Distance Directory	.75

Long Distance Billing at Operator Assisted Rate PLUS Mark-up
Please Initial Here:_____

PLEASE INDICATE METHOD OF PAYMENT:

VISA _____ MC _____ BILLING ZIP CODE _____

CREDIT CARD NO. _____ EXP. DATE: _____

PRINT NAME: _____

SIGNATURE: _____

Return this form with payment to:
AMERICAN EXPO CORP.
P.O. Box 283
Fort Washington, PA 19034
267.718.8013 FAX 215.885.2744

(6/2008)