MetropolitanPavilion

TELEPHONE AND ELECTRIC FORM

Event Name:_____ **Event Date:**_____

Your Company Name:_____ **Booth #** _____

Address:_____ **City:** _____ **ST:** _____ **Zip:** _____

Phone:_____ **Fax:** _____ **E-mail:** _____

☐ **Please indicate if you would like e-mail confirmation that your order has been received**

Card Type: ☐ MasterCard ☐ Visa ☐ American Express

☐ Corporate ☐ Personal

Credit Card #

EXPIRATION DATE															

Cardholder's Name (PRINT) _____

Billing Address (if different from above):_____

City: _____ **ST:** _____ **Zip:** _____ **Tel:**_____

Cardholders Signature:_____ **Date:**_____

☎ telephone ☎

____ **x Telephone Rental @ $30 per phone** ..... **$** _____

____ **x Phone Line @ $90 for 1st day** ..... **$** _____

____ **x Phone Line for ___ (#) additional days @ $70 per day** ..... **$** _____

Sub Total **$** _____

NY Sales Tax (8.875%) **$** _____

Total **$** _____

NOTE: ALL LINES HAVE LOCAL ACCESS ONLY AND DO NOT REQUIRE DIALING "9" BEFORE THE PHONE NUMBER

ELECTRIC

____ **x ea. booth or ea. 20 amp outlet (1700 Watt /110 Volt ea.) @ $75 per day X ___ Days** **$** _____

____ **x Extension Cord Rental (25' 3-phase) @ $10** ..... **$** _____

Sub Total **$** _____

NY State Tax (8.875%) **$** _____

Total **$** _____

For direct tie-in to main power, tie-in/tie-out, and electrician labor fees please consult your Event Coordinator

OVERALL TOTAL TO BE CHARGED TO CREDIT CARD **$** _____

Fax this completed form to the Accounting Department at (212) 463 7099