



# EXHIBITOR REQUIREMENTS

Please complete and return this form a minimum of twenty one (21) days prior to [exhibitorrequests@ma.org.au](mailto:exhibitorrequests@ma.org.au)

## EXHIBITOR AND STAND DETAILS

EVENT NAME				
COMPANY NAME		MOVE IN DATE	00 / 00 / 00	TIME
CONTACT NAME		MOVE OUT DATE	00 / 00 / 00	TIME
ADDRESS				
EMAIL		STAND NO.		
ON SITE MOBILE				

## PHONE / COMMS CONNECTION

I would like to arrange a phone / comms connection and/or equipment for my stand  Yes  No

ITEM	PRICE	QUANTITY	EXTRA CHARGES	TIME AND DATE REQUIRED
Telephone line with handset through VoIP system (Line access through PABX BY dialing "0")	\$60.00		Call Costs	
Fax line through VoIP system (Line access through PABX by dialing "0")	\$60.00		Call Costs	
Dedicated PSTN Line (direct line out) *** ideal for eftpos ***	\$100.00		Call Costs	
Polycom Conference Speakerphone (includes connection)	\$100.00		Call Costs	
Polycom Video Conference Kit (includes video unit, ISDN lines up to 512k, monitor and set up)	\$1,000.00		Call Costs	
RF TV Antenna Connection	\$60.00			
Fax machine (basic model)	\$80.00 per day		\$60.00 line rental and call	
P.O.S. Terminal (basic set up only)	\$250.00 per show			
<b>TOTAL PHONE / COMMS CONNECTION</b>				



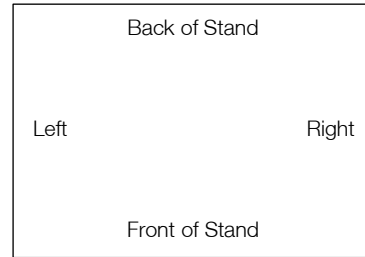
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Please indicate the approximate location of service placement within the booth with an (X) and also include any neighbouring booth numbers.

If available, please provide additional documentation and/or floorplans to ensure accurate placement of services.

If location is not provided within three working (3) days prior to show move in, the services will be place in the most convenient location and the customer is then responsible for the placement of services.



## PAYMENT

I authorize the RNA to charge the following credit card  Yes  No

### TOTAL CHAGES TO CREDIT CARD

Credit Card Type	AMEX (SURCHARGE APPLIES) <input type="checkbox"/>	VISA <input type="checkbox"/>	MASTERCARD <input type="checkbox"/>
Cardholder Name	Expiry Date		00 00 00
Card Number	CCV		
Signature			