

CHICAGO O'HARE

HOTEL EXHIBITOR FORM

PLEASE COMPLETE THIS FORM FOR SHIPPING REQUIREMENTS.

If submitting form only (no credit card authorization), please email to: aldina.kahrimanovic@loewshotels.com

If submitting with credit card authorization, please fax to: 1.847.447.4051 Attn:Aldina Kahrimanovic

****for security reasons, we are unable to accept forms with credit card authorizations via email****

Sponsor On-Site Contact Information:

NAME: _____

COMPANY: _____

EMAIL: _____

CELL PHONE: _____

In-Bound Shipping

- I will NOT be shipping anything to the conference
 - I estimate shipping approximately _____ (# of) boxes to the Loews Chicago O'Hare Hotel. Please indicate dimensions and details (Tracking Numbers preferred) for any boxes you will be shipping:
-
-

Return Shipping

- I have a FedEx Express Account and will bring my own form for shipping
- I have a UPS Account and will bring my own form for shipping
- I do not have a UPS or FedEx account but have read the instructions below and will bring my own form with payment information for shipping
- I will NOT have a return shipment

Payment

- I would like all handling/Receiving charges billed to my hotel guestroom: _____
- I would like all handling/Receiving charges billed to my credit card. Please fill out attached credit card form. Packages will not be delivered to booth area unless form of payment is received.

Handling & Receiving Charges:

- | | |
|--|---------------|
| <input type="radio"/> Letters | Complimentary |
| <input type="radio"/> 0-5lbs | \$7.00/box |
| <input type="radio"/> 6-25lbs | \$15.00/box |
| <input type="radio"/> 25-50lbs | \$25.00/box |
| <input type="radio"/> 51-99lbs | \$40.00/box |
| <input type="radio"/> 100lbs+ or Pallets | \$175.00 each |

All packages and boxes sent to the hotel must be marked as follows:

Address packages to:

- Group's Name
- Onsite Contact Name:
- Exhibitor Name/ Booth # (if applicable):
- Attn: Aldina Kahrmanovic
- Loews Chicago O'Hare
- 5300 N River Road
- Rosemont, IL 60018
- (# of total boxes)

Outgoing Packages

Packages will be picked up from meeting space and brought to the shipping area at the conclusion of the event. We advise bringing ready to ship labels since we do not have a full service package room.

Due to limited on-site storage, there will be a \$25.00/day, per item charge for all packages left at the property more than three (3) business days.

Pick-up of packages should be scheduled Monday-Friday 7:00 AM to 4:30 PM.

Thank you.

Conference Name:	
Company:	
Room:	
Booth #:	
On-site Contact:	
Dates Requested:	

General AV Equipment	Qty	Days	Per Day Charge
Laptop Computer			\$240
Laser Printer - B&W			\$230
6'-25' Computer Cable			\$25
20" LCD Monitor			\$145
32" LCD Monitor			\$260
46" LCD Monitor			\$535
70" LCD Monitor w/ Stand			\$1,135
Internet/Telecom Services			
High Speed Wireless Connection			\$150
High Speed Wired Connection			\$600
Telephone Line			\$95
Dedicated Bandwidth	<i>Please Call For Pricing</i>		
Power Services			
Electrical Service w/ Power Strip			\$98
Dedicated 20 amp Circuit w/ Power Strip			\$185
Additional Power Needs	<i>Please Call For Pricing</i>		

Please fax completed form to
PSAV Sales Office
847.928.2917
(Secure Line)

For questions please call:
847.268.2896

Credit Card Authorization

Name (Print)	
Card #	*PLEASE CALL 847.928.2896 TO PROVIDE CARD NUMBER*
Expiration Date	
Billing Address	
City, State, Zip	
Phone Number	
Email Address	
Signature	

Charges are per day. Event Technology Support (ETS) charge of 24% and Local Sales Tax may apply. Completed form must be received at least three business days prior to beginning show date. A receipt for all charges will be sent to the email address provided at the conclusion of the event. All cancellations within 48 hours are subject to 50% fee. All day-of cancellations are subject to full amount of order including delivery and tax. Prices valid for booth events only. Onsite orders are subject to a 35% surcharge. Additional services and equipment available upon request. Contact PSAV for details. 847.928.2896



LOEWS

HOTELS • RESORTS

BUSINESS SERVICES CENTER
NASHVILLE

Loews Chicago O'Hare Credit Card Authorization Form

I hereby authorize Loews Chicago O'Hare to charge my credit card for the following:

- Room & Tax
- Room, Tax, Food & Beverage
- All Charges
- Other (Please Specify):

Type of Credit Card (please circle):

American Express / Visa / MasterCard / Discover / JCB / Diner's Club

Account Number: _____ Expiration Date: _____

Cardholder Name: _____

E-Mail Address of Cardholder:

Address:

Telephone Number (Day): _____ (Night): _____

Name of Guest(s):

Reservation Confirmation Number:

Arrival: _____ Departure: _____ Rate: _____

Card Holder's Signature: _____ Date: _____