



AMERICASMART-ATLANTA BOOTH CLEANING SERVICES ORDER FORM
Atlanta International Fine Linen & Home Textiles Market - March 8-10, 2008

DEADLINE for advanced orders is February 21. Orders received AFTER February 21 will be charged the floor rate.

COMPANY NAME \_\_\_\_\_ BOOTH NUMBER \_\_\_\_\_
ADDRESS \_\_\_\_\_
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_
TELEPHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

RATES & SERVICES

All rates based on gross booth area; 100 square foot minimum

Table with columns: Carpet Cleaning, Advance Rate\*\*, Floor Rate, Booth Size, Days, Total. Rows include Vacuuming (Once), Vacuuming (Daily), and Shampooing.

Display Cleaning & Dusting

Rates are per 100 square feet

Table with columns: Exhibit Cleaning (Once), Exhibit Cleaning (Daily), Advance Rate, Floor Rate, Booth Size, Days, Total.

Porter Service

Rates are per 100 square feet

(Service includes two-hour intervals of emptying wastebaskets)

Table with columns: Porter Service (Daily), Booths, Advance Rate, Floor Rate, Booth Size, Days, Total.

Total - All Services \$ \_\_\_\_\_

PAYMENT INFORMATION λ PAYMENT MUST ACCOMPANY ORDER

Payment by check or money order payable to AmericasMart. All checks must be drawn on U.S. banks. A service charge of \$20.00 will be assessed on all returned checks. Wire transfers for this service will not be accepted.

Check: \_\_\_\_\_ Money Order: \_\_\_\_\_ (Please include either with the completed Cleaning Services Order Form)

Cardholder Name: \_\_\_\_\_

\_\_\_ Visa \_\_\_ MasterCard (We do NOT accept American Express or Discover)

Card Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_ 3-Digit Code \_\_\_\_\_

Cardholder Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Amount to Charge: \$ \_\_\_\_\_ (write in the exact amount to charge)

I, the cardholder, authorize the amount specified above to be charged to my credit card for payment of cleaning services. I agree that the above information is correct. I understand that this amount is non-refundable and non-transferable in the event of a cancellation.

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

MAIL PAYMENT TO: AmericasMartvAtlanta, 240 PEACHTREE STREET, SUITE 2200, ATLANTA, GEORGIA 30303, ATTN: Convention Services

FAX TO: 404/220-2253

AVOID DUPLICATION! If you fax this form with credit card info, DO NOT mail the original form or send another form of payment.