



Renaissance Nashville Hotel

Exhibitor Audio Visual Order Form

Email Completed Forms to: RenNashAV@jsav.com

611 Commerce Street Nashville, TN 37203 Ph 615-525-4147 Fax 615-525-4100

QTY	Internet / Telephone	# of days	Daily Rate	Total
	Initial Wired Internet Connection (1.5 Mbps)		\$50.00	
	Additional Wired Connections (Shared 1.5 Mbps)		\$15.00	
	Wireless Internet Connection (1.5 Mbps)		\$15.00	
	Wireless Internet Connection (3 Mbps)		\$25.00	
	Wireless Internet Connection (5 Mbps)		\$50.00	
QTY	Video /Projection Equipment	# of days	Daily Rate	Total
	DVD Player		\$50.00	
	Rolling Cart or Stand w/ Skirt (32" & 54" available)		\$45.00	
	LCD Projector 4k lumens / brighter projectors available		\$350.00	
	Tripod Screen (5', 6', 7', & 8' available)		\$80.00	
QTY	Audio Equipment	# of days	Daily Rate	Total
	Small Sound System - 2 Speakers & Microphone		\$250.00	
	Custom Designed Sound Systems Available		CALL	
QTY	Data Display/Computer Equipment	Show Rate	Show Rate	Total
	Laptop Computer	Show Rate	\$350.00	
	20" LCD Flat Panel Computer Monitor - no audio	Show Rate	\$200.00	
	32" LCD Flat panel monitor w/ stand and built-in speaker	Show Rate	\$450.00	
	48" LED Flat panel monitor w/ stand and built-in speaker	Show Rate	\$650.00	
	65" LED Flat panel monitor w/stand and build-in speaker	Show Rate	\$800.00	
QTY	Electrical Service	# of days	Daily Rate	Total
	Single Outlet Booth Power (15 Amp)		\$50.00	
	Powerstrip		\$25.00	

Feel free to contact us regarding our complete inventory not listed above.

Please allow your order to reach us 10 days in advance.
 A 15% rush charge will apply to 72 hours or less notice.

Rental payment is due in advance either by check or major credit.
 72 hours or less cancellations are subject to Full Charge.

Equipment Total

25% Service Charge

Subtotal

15% Rush Charge (if applicable)

9.50% Sales Tax

TOTAL

[Prices Subject to change without notice]

Credit Card Information:

Card Holder's Name:	Credit Card Number:
Type:	Expiration Date :

Cardholder's Signature _____

Company Information	Delivery Information	
Company Name :	Show Name :	
Address :	Booth / Room :	
City :	Delivery Date :	Time:
State / Zip :	Removal Date :	Time:
Phone :	On-Site Contact :	
Fax:	**On-Site Contact MUST be in booth to accept delivery.	
E-Mail:		
Contact:		

2/28/2012

AVEO # _____
 PMS # _____