



GATEWAY CENTER

Send Completed Forms to:

One Gateway Drive
Collinsville, IL 62234
P. 618.345.8998
F. 618.345.9024
www.gatewaycenter.com

Orders must be Postmarked by September 12, 2008 for Advanced Rates

Exhibitor Service Order Form

Electrical Services					
110 Volt	Quantity	Number of Outlets	Advance Rate	Floor Rate	Total
0-500 Watts			\$35.00	\$50.00	
501-1000 Watts			\$45.00	\$60.00	
1001-1500 Watts			\$55.00	\$70.00	
1501-2000 Watts			\$65.00	\$80.00	
Subtotal					\$

Information Technology			
	Advance Rate	Floor Rate	Total
Telephone Line	\$95.00	\$120.00	
High Speed Internet Patch Fee	\$160.00 First Day	\$185.00 First Day	
Wireless Internet*	\$160.00 First Day	\$185.00 First Day	
Additional Day	\$50.00	\$50.00	
Subtotal			\$

Hourly Rates Available

The below orders require an electrician at prevailing rates.

208 Volt	Quantity	Advance Rate	Floor Rate	Total
1000 Watts - Single Phase		\$70.00	\$85.00	
2000 Watts - Single Phase		\$75.00	\$90.00	
3000 Watts - Single Phase		\$80.00	\$95.00	
1000 Watts - Triple Phase		\$85.00	\$100.00	
2000 Watts - Triple Phase		\$90.00	\$105.00	
3000 Watts - Triple Phase		\$95.00	\$110.00	
Subtotal				\$
Add 25% of electric subtotals for 24 hour service.				\$
<i>Electrician Rates</i>		Per Hour	Hours	*4 hr. minimum required
Regular time		\$80.00		
Overtime		\$120.00		
Double Time		\$165.00		
Grand Total for Electric				\$

Exhibitor Equipment			
	Quantity	Rate	Total
Table (6' or 8')		\$8.00	
Table Skirting		\$13.00	
Vinyl Table Covering		\$7.00	
Chair		\$2.50	
3'(h)x10'(l) pipe & drape		\$15.00	
8'(h)x10'(l) pipe & drape		\$15.00	
Wastebasket		\$1.50	
Storage (per 100 lbs.)		\$10.00	
Water Service	Call for Quote		
Subtotal			\$

Services Total \$

*Must call Gateway Center to schedule connect/disconnect times.

Event Information	
Event Name	Gateway Fall Home Show
Event Dates	September 26-28, 2008
Company Name	
Contact Person	Booth Number
Address	
City	State Zip
Phone	Fax
E-mail	

Payment Information	
Payment Must Accompany Order	
Advance Orders Take Priority	
Cash Check MC Visa AMEX	
CC #	
Exp. Date	
Cardholder (print):	
Signature:	