

NAME OF CONFERENCE		START DATE	END DATE	# OF EVENT DAYS
SCAA Conference		2-15-24	2-16-24	
COMPANY NAME	ON-SITE CONTACT NAME & NUMBER		ROOM/ BOOTH NAME/NUMBER	
BILLING ADDRESS		CITY & STATE		ZIP CODE
DELIVERY DATE	DELIVERY TIME	PICKUP DATE	PICKUP TIME	
ORDERED BY	EMAIL		PHONE	

Email completed form to the Encore Representative listed above.
 Once this request form is submitted, an Encore Representative will contact you for an official order review and signature.
 Labor charges, sales tax, loss damage waiver, and service charges may apply.

PROJECTION	QUANTITY	DAILY RATE
LCD PROJECTOR		\$375.00
TRIPOD SCREEN		\$95.00
25' HDMI CABLE		\$10.00

MONITOR	QUANTITY	DAILY RATE
24" MONITOR		\$170.00
55" MONITOR		\$375.00
85" MONITOR		\$1,000.00

AUDIO	QUANTITY	DAILY RATE
EV SPEAKER		\$125.00
EV SUBWOOFER		\$135.00
SPEAKER STAND w/ SKIRT		\$ 34.00
MIXER 14CH		\$175.00

INTERNE T	QUANTITY	DAILY RATE
SIMPLE WIFI CONNECTION		\$125.00
HARD LINE CONNECTION 5mb		\$175.00

POWER	QUANTITY	DAILY RATE
110V SINGLE PHASE - 10 AMP		100.00 per day
PWR-DROP S PHASE - 50 AMP		235.00 per day

MISCELLANEOUS	QUANTITY	DAILY RATE
LAPTOP		\$225.00
FLIPCHART PACKAGE		\$75.00



encore

EVENTS THAT TRANSFORM

Credit Card Consent Form

Credit Card Type: *American Express* ___ *Discover* ___ *MasterCard* ___ **Visa** ___

Credit Card Number:

Expiration Date:

Cardholder's Name:

(As it appears on credit card)

Cardholder Billing Address: _____

City: _____ **State:** _____

ZIP Code: _____

Cardholder email address: _____

Cardholder's Phone Number: _____

Customer Name: _____

(Name as it should appear on the invoice)

I, (please print) _____, certify the above information to be true and correct to the best of my knowledge. As the cardholder, I am authorizing the above credit card account to be charged for the attached order and any additional amounts incurred as a result of all show site changes ordered by my representatives and/or place my card on file for Security Deposit purposes in the event of payment default, cancellation fees or damages/losses owed per Encore Terms and Conditions – See Terms and Conditions.

Signature _____ **Date** _____