

# EYE BEAM EVENT SERVICES

2611 W. 5<sup>th</sup> Avenue, Eugene, OR 97402

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## TRADE SHOW EQUIPMENT ADVANCE ORDER FORM

\*REQUIRED

(Please Print)

\*Event: \_\_\_\_\_ \* Event Date: \_\_\_\_\_ \*Booth Number: \_\_\_\_\_

\* Your Name: \_\_\_\_\_

\* Company Name: \_\_\_\_\_ Company Address: \_\_\_\_\_

\* Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ \* Email: \_\_\_\_\_

BOOTH CARPET (Black or Grey)	PRICE	AFTER DEADLINE	QTY	COLOR	PRICE
10'x10'	\$60.00	\$75.00	_____	_____	_____
10'x20'	\$100.00	\$130.00	_____	_____	_____

(Additional Carpet Sizes Available, Call for Details)

BOOTH EQUIPMENT	PRICE	AFTER DEADLINE	QTY (EACH SIZE)	QTY(TOTAL)	PRICE
RECTANGULAR TABLES (No Linen or Skirt)	\$25.00	\$30.00	<input type="checkbox"/> 6FT _____ <input type="checkbox"/> 8FT _____	_____	_____
SKIRTED TABLE - Black <input type="checkbox"/> White <input type="checkbox"/> (With Table Cover & Skirt)	\$40.00	\$50.00	<input type="checkbox"/> 6FT _____ <input type="checkbox"/> 8FT _____	_____	_____
COUNTER HEIGHT TABLE (Black Skirt with White Table Cover)	\$60.00	\$75.00	<input type="checkbox"/> 6FT _____ <input type="checkbox"/> 8FT _____	_____	_____
BISTRO TABLE	\$20.00	\$25.00	<input type="checkbox"/> STANDARD <input type="checkbox"/> TALL	_____	_____
BISTRO TABLE STRETCH COVER	\$ 12.00	\$15.00	<input type="checkbox"/> BLACK <input type="checkbox"/> WHITE	_____	_____
CHAIRS	\$ 4.00	\$ 6.00		_____	_____
BISTRO CHAIRS	\$40.00	\$52.00		_____	_____
TRASH CANS	\$ 2.00	\$ 3.00		_____	_____
EASEL	\$ 7.00	\$ 9.00		_____	_____

(Additional Equipment Available Upon Request)

**TOTAL DUE:** \_\_\_\_\_

All orders must be placed using this form and **must be received by Eye Beam 5 Days prior to event date. Orders received after deadline will be charged accordingly.** Eye Beam cannot guarantee equipment availability on orders not placed in advance.

**To ensure proper processing Fax completed Order Form to: (541) 726-3273**

Or you may e-mail completed form to: [rentals@eyebeameventservices.com](mailto:rentals@eyebeameventservices.com)

CREDIT CARD INFO (Check One)     VISA     MASTERCARD     DISCOVER    **(We Do Not Accept AMX)**

NAME ON CARD: \_\_\_\_\_ CARD#: \_\_\_\_\_ EXP DATE: \_\_\_\_\_

CC CODE (Back of Card): \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_