



UNIVERSAL ORLANDO®

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# PSAV Audiovisual Exhibitor Order Form

PSAV is proud to serve as the in-house provider for Audio Visual Services at the Loews Resorts



SHOW NAME: ---	START DATE:	END DATE:	# SHOW DAYS:
COMPANY NAME:			
ON-SITE CONTACT NAME:			ROOM / EXHIBIT BOOTH #:
STREET ADDRESS:	CITY & STATE :		ZIP CODE:
TELEPHONE NUMBER:	FAX NUMBER:		
ORDERED BY:	EMAIL ADDRESS (PLEASE PRINT):		



	Day Rate	Show Rate	Qty	#Days	Total		Day Rate	Show Rate	Qty	#Days	Total
<b>Monitors</b> <i>Specialty Cables upon request Unit includes a 6' HDMI cable</i>						<b>Video Equipment</b>					
24" LCD Flat Screen Monitor	\$145.00	\$290.00				<b>Audio Equipment</b>					
32" LCD Screen and Cables	\$360.00	\$720.00				DVD Player	\$95.00	\$190.00			
46" LCD Screen and Cables	\$565.00	\$1,130.00				Powered Speaker with Tripod	\$115.00	\$230.00			
55" LCD Screen and Cables	\$765.00	\$1,530.00				4 channel Mixer	\$75.00	\$150.00			
65" LCD Screen and Cables**	\$885.00	\$1,770.00				Wireless Mic	\$210.00	\$420.00			
70" LCD Monitor* **						<b>Lighting</b>					
90" LCD Monitor * ** <i>Additional labor requirements</i>						Atmospheric LED 5 light pkg.	\$250.00	\$500.00			
32" - 70" Touchscreen * ** <i>Priced upon request</i>						Additional Lighting options available.					
42"-70" Smart T.V. * ** <i>Priced upon request</i>						<b>Laptops</b>					
Monitor Chrome Plasma Stands 72"H	\$125.00	\$125.00				Windows		\$240.00			
Mini Display/Apple Dapter	\$25.00	\$25.00				Apple Macbook		\$240.00			
<p><b>Advance Show rates cut off 10 days prior to start of Show.</b></p> <p><b>Please email your orders to: LoewsOrlandoExhibits@PSAV.com</b></p> <p>* Price is subject to availability ** May require Additional Labor/Install</p>						<b>Orders less than 10 days prior to show start date</b>	\$100.00	\$100.00			
						<b>Total Equipment Rental</b>					
						<b>32% Service Charge</b> <i>Includes basic set up and removal of equipment</i>					
						<b>6.5% Sales Tax</b> <i>On Equipment and Service Charge</i>					
						<b>GRAND TOTAL</b>					

**FOR PSAV USE ONLY – PSAV WILL CONTACT YOU FOR PAYMENT INFORMATION\*\*\*\*\***

CARDHOLDER'S NAME:			BILLING ZIP CODE:		
AMEX	MCARD	CC #:	EXP DATE:		
VISA	CHECK				

