

HANGING SIGN INFORMATION

**P.O. Box 21245 - Louisville, KY 40221
Ph. (502) 969-8588 - Fax (502) 968-4788**

DEALINE FOR RETURN OF FORM: **

Payment Policy -

Payment in full, including tax, must accompany order and be recieved by our office by deadline to qualify for discount rates. Please complete payment authorization form.

Cancelation Policy -

Cancelation after the deadline will be charged at 50% of prevailing rate. Cancelation after installation will be 100% of prevailing rate.

VALID REFUNDS WILL BE ISSUED AFTER CLOSE OF SHOW

Late Request -

Requests after deadline will be filled as available at the standard rates.

Color/Size Selection-

Choices not indicated will be selected by AG Exhibitions, INC to coordinate with the show colors and size of exhibit.

NO HANGING SIGN WILL BE APPROVED ON SHOWSITE

**** AT SITE PLEASE ADVISE/NOTIFY A.G. EXHIBITIONS. WHEN YOUR BANNER IS READY TO BE HUNG SEE A REPRESENTATIVE AT OUR SERVICE DESK TO SCHEDULE HANGING ****

A.G. Exhibitions, INC is not responsible for assembling all hanging signs.. You must have the sign assembled and ready to hang.

OK TO PROCEED - WITH EXHIBITOR SUPERVISOR

Name of Supervisor: _____

Actual Start Time: _____ AM or PM Day: _____ Date: _____

OK TO PROCEED - WITHOUT EXHIBITOR SUPERVISOR

It is the responsibility of your Company to have a representative available at the time of construction and installation of the hanging sign. If no one is present at the prearranged time, the will forfeit their right have their own supervision, and A.G. Exhibition will install and hang sign at its own discretion with out supervision. A 25% supervision fee will be charged when exhibitor or exhibitor's representative is not present.

Regardless of previous usage, A.G. Exhibitions must have an authorized signature at the top of this form and the following information completed in order to approve your hanging sign.

SIGN SIZE

Height _____
Length _____
Width _____

- Square
- Rectangle
- Round
- Triangle

New Sign

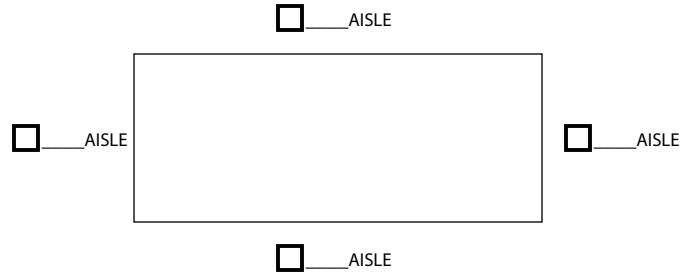
Existing Sign

Clean and touch up sign? Yes No

Does your sign require electricity? Yes No

YOU MUST PROVIDE ADEQUATE INFORMATION NEEDED TO HANG YOUR SIGN, INCLUDING ASSEMBLY INFORMATION AND LOCATION IN YOUR BOOTH, ON TIME, OR IT WILL NOT BE HUNG.

1. Number of feet from floor to top of sign _____
2. Number of feet in from LEFT SIDE of exhibit space _____
3. Number of feet in from RIGHT SIDE of exhibit space _____
4. Number of feet in from BOTTOM SIDE of exhibit space _____
5. Number of feet in from TOP AISLE _____



1. Signs must include two (2) blueprints or drawings with detailed information to determine pick points for hosting. One (1) drawing to be included with order.

2. Signs must have certified guaranteeing that stress points have been engineering properly , A.G. Exhibitions, INC. Will not hang sign if, in their opinion it appears unsafe.

3. Signs must have rigging points

4. Electrical signs must be in working order and in accordance with national electric codes. Electric must be ordered directly from electrical contractor. A.G. Exhibitions will **NOT** install electric.

**HANGING RATES - ONE (1) HOUR MINIMUM
RATE INCLUDE LABOR AND HIGHLIFT CHARGE**

NON-ELECTRICAL LABOR HOURS / RATES

Straight Time Hours: 8:00 am to 5:00 pm Monday through Friday
Overtime: Before 8:00 am and after 5:00 pm Monday through Friday All hours Saturday, Sunday, and Holidays.

*Labor Straight Time Rate: \$200.00 / Hour

*Labor Overtime Rate: \$300.00 / Hour

No credit will be given after close of event on items or services ordered but not received. If you have a problem, please see the Service Desk Personnel at the event site prior to opening.

Charges listed above include delivery to your booth, rental (not sale) during the event, and removal.

NOTE: NO EXHIBITOR MATERIAL CAN BE ATTACHED TO BOOTH DRAPERY, SUPPORTING METAL OR TABLE SKIRTING.

Subtotal \$ _____

****TRANSFER AMOUNT TO LINE D ON PAYMENT INFORMATION PAGE****

Name of Event: _____ Booth # _____ Firm Name: _____

Phone: (____) _____ Fax: (____) _____ Address _____
(street) (City) (State) (Zip)

Print/Type Name: _____ Signature: _____ Date: _____

*****THIS FORM MUST BE COMPLETELY FILLED OUT AND RETURNED FOR YOUR ORDER TO BE PROCESSED*****

*****PLEASE KEEP A COPY FOR YOUR RECORDS, AS WE DO NOT SEND CONFIRMATION OF ORDERS!*****