


Furniture / Carpet Order Form

Booth Number _____

Show Name _____

Need a Table?

Description	Qty.	Rate	Total
 TABLES 30" HEIGHT			
8' x 2' Skirted		80.00	
6' x 2' Skirted		75.00	
4' x 2' Skirted		70.00	
Fourth side of table skirted ADD		20.00	
Raise to 40" ADD (Black only)		20.00	
<input type="checkbox"/> Red <input type="checkbox"/> Blue <input type="checkbox"/> White <input type="checkbox"/> Black			
Plain table <input type="checkbox"/> 8' <input type="checkbox"/> 6' <input type="checkbox"/> 4'		25.00	

Carpet Grey (Includes installation & removal)

Description	Qty.	Rate	Total
UNDERLAY Calculate sq. ft. x price per sq. ft			
Size _____ ft. x _____ ft.		.95	
= _____ sq. ft.		sq. ft.	
CARPET Calculate sq. ft. x price per sq. ft			
Size _____ ft. x _____ ft.		1.45	
= _____ sq. ft.		sq. ft.	
BOOTH CLEANING Calculate sq. ft. x price per sq. ft		\$.30	
sq. ft. _____ x # of days _____		sq. ft.	

Your Information

Company: _____

Contact: _____

Street Address: _____







City: _____



Prov/State _____ Postal/Zip Code _____

Tel (_____) _____ Fax (_____) _____

Email _____

How about some Chairs?

Description	Qty.	Rate	Total
 Fabric Sled Base Chair <input type="checkbox"/> Grey <input type="checkbox"/> Light Green		32.00	
 Fabric Sled Base Armchair <input type="checkbox"/> Black <input type="checkbox"/> Light Green		50.00	
 Folding Chair		20.00	
 High Back Stool		70.00	
 Fabric Back Steno Chair		45.00	
 Directors Chair <input type="checkbox"/> Low Height <input type="checkbox"/> High Height		60.00	

 PEDESTAL TABLE - 31" DIAMETER 29" Table Height		58.00	
 HIGH BAR TABLE - 31" DIAMETER 41" Table Height		80.00	

Drape (Includes installation & removal)

Description	Qty.	Rate	Total
lin. ft. of 3' high drape		5.50/ft	
lin. ft. of 8' high drape		6.00/ft	
lin. ft. of 12' high drape (Black only)		7.50/ft	

Blue Red Black White

Cost Summary

**ORDERS MUST BE PAID
IN FULL PRIOR TO
SHOW MOVE-IN**

SEE ATTACHED CREDIT CARD FORM

Approved By: _____

Date: _____

Subtotal _____

25% Surcharge _____

14 days before Move-In Date

GST 5% _____

GST #85904 7243 RT 0001

Total _____

A 25% Cancellation Fee will be applied to all orders received and then cancelled. If full service has been provided then 100% of original fee will be applied.

MAILING ADDRESS: 239 Westchester Way, Chestermere, AB T1X 1E2
(403) 273-8064 Office (403) 273-8065 Fax gazexh@telus.net