



Shepard Exposition Services

1531 Carroll Drive, NW

Atlanta, GA 30318

Customer Service Phone: (404) 720-8600

Customer Service Fax: (404) 720-8755

Customer Service Email: atlanta@shepardes.com

Event Code: G143840911

Discount Deadline: August 23, 2011

OVERHEAD RIGGING/HANGING SIGN

BusCon

September 13-14, 2011

Navy Pier-Chicago

Chicago, Illinois

RIGGING GUIDELINES

- All ceiling rigging must conform to Show Management rules and regulations and facility limitations.
- All overhead rigging/hanging must be assembled, installed, and removed by Shepard Exposition Services certified riggers. Please complete the Labor Order Form to have your sign/truss assembled. Include set-up instructions for fixtures needing assembly.
- Overhead hanging signs are to be sent in a separate container directly to the advance warehouse using the Advance Hanging Sign shipping label included in this manual. The container must arrive no later than advance warehouse deadline date. If these procedures are not followed, Shepard Exposition Services cannot guarantee the hanging of your sign.
- Electrical signs must be in working order and in accordance with the National Electrical Code. Electrical services must be ordered through the Electrical Service Provider (form included in manual).
- Structures weighing over 200 lbs. per point must have a rigging plot plan approved in advance.

RIGGING CREW

Installation					
Code	Est. Hours	Description	Advance	Regular	Amount
69001		ST	669.20	869.95	\$
69002		OT	793.80	1031.95	\$
69005		DT	918.40	1193.90	\$

Dismantling					
Code	Est. Hours	Description	Advance	Regular	Amount
69003		ST	669.20	869.95	\$
69004		OT	793.80	1031.95	\$
69006		DT	918.40	1193.90	\$

ST - Straight time: Monday-Friday, 8:00 AM - 5:00 PM

OT - Overtime: Monday-Friday, 5:00 PM - Midnight; Saturday, 8:00 AM - Midnight

DT - Doubletime: All other hours and holidays

Total Estimated Install/Dismantle: \$

N/A Tax: \$

Estimated Amount Due: \$

Rates are per lift and crew (up to 3 riggers) per hour. One hour minimum per lift/crew - lift/crew thereafter is charged in 1/2 increments.

Straight time cannot be guaranteed. Must order by discount deadline date to receive advance pricing.

Other charges may apply, please refer to Rigging Supplies Pricing Form for list of items.

SIGN DESCRIPTION, SIZE & WEIGHT

• For all hanging signs (excluding banners), please provide detailed drawing (blueprint if available) so hanging anchor points can be determined.

Type: Cloth Wood Metal Truss Other: _____

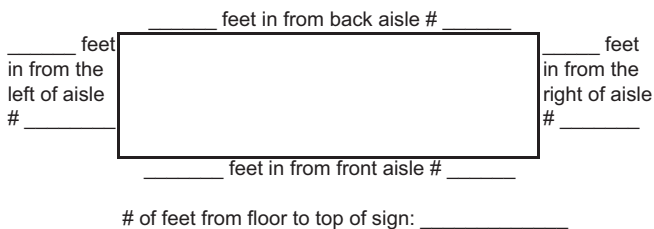
Shape: Square Triangle Rectangle Other: _____

Size: Height _____ Length _____ Width _____

Weight: _____

PLACEMENT DIAGRAM

Please use the diagram below to show us the placement of your sign/truss.



REQUESTED DATE/TIME & SUPERVISION

Please choose type of supervision:

- Shepard Supervision
- Exhibitor Supervision
- Display House (EAC)

If not choosing Shepard Supervision, please request date and time.

Install: Date: _____ Time: _____

Dismantle: Date: _____ Time: _____

Please note: Date/times are not guaranteed.

Please complete the following:

Company Name: _____ Booth #: _____

Contact Name: _____ Phone #: _____

Authorized Signature: _____

Signature also indicates you read and accept the Payment Policy and Terms and Conditions.

Must order by discount deadline date to receive discounted pricing. Payment Authorization must be completed and returned with order.

Orders cancelled without 24-hour notices will be charged a one (1) hour cancellation fee.

HANGING SIGN SHIPPING LABELS

BusCon

HANGING SIGN SHIPPING ADDRESS LABELS

HANGING SIGN: If you have a sign or anything (truss, etc.) that has been approved to hang from the ceiling, send it to the advance shipping warehouse address. Hanging items must be identified and readily available since they are installed first, before the show floor becomes encumbered by freight.

R U S H	
	ADVANCE WAREHOUSE
	HANGING SIGN
	TO: _____ (EXHIBITING CO. NAME)
	Booth #: _____ c/o UPSF/Shepard Exposition Services 2500 South Loomis St Chicago, IL 60608
	Delivery Hours: M-F, 8-4:30 PM
	For: BusCon First day freight can arrive w/o a surcharge: August 15, 2011 Last day freight can arrive w/o a surcharge: September 5, 2011

R U S H	
	ADVANCE WAREHOUSE
	HANGING SIGN
	TO: _____ (EXHIBITING CO. NAME)
	Booth #: _____ SHEPARD EXPOSITION SERVICES 2500 South Loomis St Chicago, IL 60608
	Delivery Hours: M-F, 8-4:30 PM
	For: BusCon First day freight can arrive w/o a surcharge: August 15, 2011 Last day freight can arrive w/o a surcharge: September 5, 2011



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PAYMENT AUTHORIZATION

BusCon

September 13-14, 2011

**Navy Pier-Chicago
 Chicago, Illinois**

Please complete the information requested below and return this form with your orders. You may choose to pay by credit card, check payable to Shepard Exposition Services, or bank wire transfer. However, we require your credit card authorization to be on file before we process your order(s) for service. We will use this authorization to charge your credit card account for any additional amounts incurred as a result of show site orders placed by your representative to include material handling charges for shipments received on your company's behalf and any unpaid balance due for Shepard services. **Credits for services will be issued at show site only.**

WIRE TRANSFER

In order to accurately process the transfer of funds from your account, please complete the following information and fax it along with a copy of the wire receipt to the fax number printed on the header of this page. A \$50 service charge will be added for processing checks drawn on foreign banks. A \$25 service charge will be added for processing U.S. wire transfers. \$50 service charge for international wire transfers.

The following information must be included on the bank copy of the wire transfer confirmation:

Name of show that you are attending - **BusCon**

Exhibiting company name

Booth number

Account Name: Shepard Exposition Services, Inc. Bank Name: Bank of America, Atlanta, Georgia USA

Routing Number: 0260-0959-3 Account Number: 3278494077

SWIFT CODE (US): BOFAUS3N SWIFT CODE (INTL): BOFAUS6S

If payment is not received by the date shown above, I hereby agree to have the balance owed to Shepard Exposition Services, Inc. charged to the credit card indicated in the next section.

CREDIT CARD INFORMATION

Type of Card:   

Credit Card #:

Expiration Date:
Month Year

Billing Address: _____

Security Code:

City, ST, Zip: _____

Name on Card: _____

Authorized Signature: _____

EXHIBITING COMPANY INFORMATION

Please fill out the following information:

COMPANY NAME: _____

BOOTH # _____

COMPANY ADDRESS: _____

PHONE: _____

CITY, ST, ZIP: _____

FAX: _____

CONTACT NAME: _____

EMAIL: _____