



Hotel Monteleone

EXHIBITOR REFERENCE SHEET

EXHIBITOR & CONFERENCE MANAGEMENT

Ms. Karen Meyer, Executive Director Education CU Council

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EXHIBIT FACILITY

Sheila Vincent, Monteleone CSM

Hotel Monteleone

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EXHIBIT MATERIAL SHIPPING INSTRUCTIONS

Hotel Monteleone

609 Iberville Street

New Orleans, LA 70130

ATTN: [On-site Exhibiting Company Contact Name]

HOLD FOR: [Company Name/Education CU Council Conference]

BOX(ES) _____ of _____ (Multiple boxes must be numbered).

Please note following shipping comments:

**Provide your onsite contact with tracking information.*

**Hotel package charges apply.*

The hotel will accept most shipments no earlier than seven (7) days prior to event; shipments over five (5) boxes must be stored with a local drayage company. Storage/ Cartage fees of eight dollars (\$8.00) per box (up to 70lbs) will apply to all shipments and will be charged to the exhibiting company. Failure to adhere to this requirement may result in the deliveries being refused or materials being unavailable when required.

Freight

The Hotel does not have a loading dock all deliveries are made street level. For heavy shipments and items being shipped in via pallets, shipper must have lift gate truck with pallet jack. Pallet may have to be broken down before moving into the meeting space depending on weight and size. Due to the layout of the hotel, we may not be able to store display material and / or show merchandise. At the conclusion of your setup operations, all related equipment (including trucks, crates etc...) must be removed from the premises and returned no earlier than the last day of the exhibit/production event.

EXHIBIT DETAILS

EXHIBITS ARE LOCATED IN THE FOLLOWING SPACE(S): **Queen Anne Ballroom**

Exhibit table space consists of one six-foot (6') draped table with one chair. The entire exhibit area is carpeted. Standard electrical power is available throughout perimeter wall outlets. If you need power it is recommended to bring an extension cord and safety tape. Hotel charges apply for dedicated power and/or non-standard electrical power.



Hotel Monteleone

Return Order to:

Tramon@royalproductions.com

Electrical Order

effective 2.14.13

Company Name
 Contact Name
 Address
 City, State Zip
 Contact Cell
 Contact Fax
 Contact e-mail

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Confirmation #:

Room or Booth

Set Up Date/Time

Removal Date/Time

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Accepted Credit Cards are VISA, Mastercard, American Express

Master Acct No. / Card Type
 Card Number
 Name on Card

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|--|
| |
| |
| |

Amount
 Exp Date
 Signature

| |
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The credit card listed above will be used for all charges, in advance and on-site.

Orders must be received 14 days prior to set up to avoid late fee of 30%. Cancellations must be received 48 hours prior to set up, to receive refund. Charges to Group Master Account can be arranged through the Convention Services Department.

| Dedicated Outlets | Rate | Quantity | Total |
|--------------------------|---------|----------|-------|
| 15a 120v outlet | \$100 | | \$ - |
| 20a 120v outlet | \$150 | | \$ - |
| Rental Items | | | |
| Power Strip | \$20 | | \$ - |
| 25' Extension Cord | \$25 | | \$ - |
| Electric Services | | | |
| ** 30a 208v single phase | \$300 | | \$ - |
| ** 60a 208v single phase | \$500 | | \$ - |
| ** 60a 208v 3 phase | \$700 | | \$ - |
| ** 100a 208v 3 phase | \$1,000 | | \$ - |
| ** 200a 208v 3 phase | \$1,600 | | \$ - |
| ** Aut 4 50' Camlock set | \$250 | | \$ - |
| ** Bare wire disconnect | \$150 | | \$ - |

LABOR / EXPOSITION SERVICES:
 ** 2 Hour minimum for installation/removal on electrical work
 Standard Rates -M-F 7:30am- 4:00pm- \$125.00
 Overtime Rates- M-F 4:00pm-7:30am- \$ \$187.50
 Double Time Rates- All Holidays and All Day Sunday- \$250.00

| | | |
|-----------------------------|----|---|
| Subtotal | \$ | - |
| Labor | \$ | - |
| 22% Set Up/Dismantle | \$ | - |
| 9% Sales Tax | \$ | - |
| 2% Tax | \$ | - |
| Total | \$ | - |

Bare wire tie ins require a disconnect box. Standard tie in method is Camlock (100a - 400a) or Hubbel Twist Lock (30a - 60a).
equipment is located beyond 50' of an existing tie in point, additional Camlock sets will be charged.
Services typically remain active throughout the duration of the event.

If

Please attach any Complex or Specific installation instructions, diagrams, and scheduling with your order.
Our service representative will contact you to discuss your particular needs, and insure order accuracy.

Our service representative will send an order confirmation within 3-5 working days.
Please contact us at hotelmonteleoneelectrical@royalproductions.com or 504.251-8091 if you do not receive your confirmation or if you have any questions.

Customer Signature and
 Date

| |
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| |
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Hotel Monteleone

Return Order to:
 hotelmonteleoneelectrical@royalproductions.com
High Speed Internet Order

EFFECTIVE 2.22.13

| | | | |
|---|--|--------------------------|--|
| Company Name Contact Name Address City, State, Zip Contact Phone Contact Fax Contact email Address | | Confirmation # | |
| | | Room or Booth | |
| | | Set Up Date/Time | |
| | | Removal Date/Time | |
| | | | |

Orders received on site are assessed a 30% expedite fee

Accepted Credit Cards are VISA, Mastercard, American Express or Master Account #

| | | | |
|---|--|-------------------------|--|
| Card Type Card Number Name on Card | | Amount | |
| | | Exp Date | |
| | | Master Account # | |

All Charges are per day and to Group Master Account and can be arranged through the Events Department.

| Per User Wireless Connections | <u>Rate</u> | <u>Quantity</u> | <u>Total Cost</u> |
|--------------------------------------|-------------|-----------------|-------------------|
| Initial Device Connection | \$ 100.00 | | |
| Additional Device Connections | \$ 35.00 | | |
| Package Wireless Connections | | | |
| 75 User Package | \$ 500.00 | | |
| 150 User Package | \$ 700.00 | | |
| Total Internet | | | |

| Telephone Service | |
|--|-----------|
| DID Long Distance Phone Line (plus toll charges, Inc. basic phone) | \$ 150.00 |
| PolyCom Conference-Style Phone Upgrade (requires 1 DID line) | \$ 250.00 |
| Total Phone Line(s) | |

| Subtotal | |
|---------------------------|--|
| 30% Expedite Fee | |
| 22% Service Charge | |
| 2% Conv Center Tax | |
| 9% Sale Tax | |
| Total (per day) | |

The Hotel Monteleone has a 40Mbps Fiber circuit dedicated to the meeting space managed and provided by Cox Communications. Our infrastructure is Cisco. Wireless Codes are provided to the Group's Liason for disbursement. The wireless connections are monitored and will be billed at a per device/per room/per day rate. The group liason is responsible for number of connections using the wireless code provided.

Printers can only be used with a direct connection to a workstation or laptop. Internet connections are provisioned for workstations and laptops only. No Hubs, Routers or Switches are allowed. Equipment housed in any MDF or IDF will be at a daily charge of \$725.

| | | | |
|---------------------------|--|-------------|--|
| Customer Signature | | Date | |
|---------------------------|--|-------------|--|



Hotel Monteleone

Credit Card Payment Authorization Form

Please complete all areas below. Incomplete requests may be rejected. This form must be received at least 5 days prior to Check-In or by specified date in Event Contract, to ensure acceptance of the credit card to be charged.

CARDHOLDER - Please complete the following section and sign/date below.

| | | | |
|---|----------------|--|------------------|
| Cardholder Name as it Appears on Credit Card: | | | |
| Credit Card Billing Address: | | | |
| City: | State: | Zip: | |
| Daytime Phone: | Evening Phone: | Email Address: | |
| Credit Card Number: | | | Expiration Date: |
| Credit Card Type: (Circle one) | | | |
| Visa/MasterCard | Amex | Diners Club | Discover |
| Credit Card Issuing Bank Name: | | Bank Phone Number (from back of your credit card): | |
| I agree to cover the following categories of charges: (Please circle) | | | |
| All Charges | Room & Tax | Food & Beverage | Retail |
| Recreation | | | I agree to |
| cover the above categories of charges up to a Maximum Amount of \$_____ | | | |

Note: Charges for room/tax or group deposits will be charged to your credit card immediately. Any incidental charges circled above will be charged at the time of check-out.

HOTEL USE ONLY

Date: _____

| | |
|------------------------------------|------------------------------|
| Guest / Group Name: | |
| Check-In / Event Date: | Confirmation / Event Number: |
| Name of Person Making Reservation: | Phone: |
| Authorized Amount: | Approval Code: Date: |

Hotel Use Only– Deposit to be immediately charged for room/tax or group event: \$_____

By signing below, you authorize the hotel to charge your credit card up to the “Maximum Amount” indicated above. You further acknowledge that all guest/group related charges (less Deposit) will be charged to the above credit card at the time of check-out or event conclusion.

Cardholder Signature: _____

Date: _____