



Desert Springs JW Marriott Resort and Spa
74855 Country Club Drive
Palm Desert, CA 92260
Attn: Audio Visual
Tel: 760-862-1560
Fax: 760-341-1792
Email: ben.ianni@americanavc.com

California Pharmacists Exhibitor Audio Visual / Internet Order Form

VIDEO				
	Quantity	Daily Rate	# Days	Extension
1/2" VHS VCR		\$85.00		\$0.00
DVD Player		\$85.00		\$0.00
55" Flat Panel Monitor w/ Rolling Stand		\$500.00		\$0.00
55" Flat Panel Monitor on tall chrome stand		\$600.00		\$0.00
55" Monitor, VHS VCR or DVD, 54" Skirted Cart Package (please circle VHS/DVD choice)		\$550.00		\$0.00
Special Request		Call for Quote		\$0.00

COMPUTER/DATA				
	Quantity	Daily Rate	# Days	Extension
19" Flat Screen Computer Monitor		\$150.00		\$0.00
55" Flat Panel Monitor w/ Rolling Stand		\$500.00		\$0.00
55" Flat Panel Monitor on tall chrome stand		\$600.00		\$0.00
Laptop Computer		\$275.00		\$0.00
Special Request		Call for Quote		\$0.00

AUDIO				
	Quantity	Daily Rate	# Days	Extension
CD / Radio / Cassette Boom Box		\$65.00		\$0.00
Wireless Microphone with small Sound System		\$250.00		\$0.00
CD Player with small Sound System		\$160.00		\$0.00
Small Booth Sound System (i.e.. For Laptop)		\$110.00		\$0.00
Special Request		Call for Quote		\$0.00

OFFICE EQUIPMENT				
	Quantity	Daily Rate	# Days	Extension
Fax Machine - Laser		\$75.00		\$0.00
Laser Printer		\$125.00		\$0.00
Special Request		Call for Quote		\$0.00

HIGH SPEED INTERNET ACCESS				
	Quantity	Daily Rate	# Days	Extension
Wired iBAHN High Speed Internet Access-per user (Daily Charge) Up to 3 meg		\$100.00		\$0.00
Wireless iBAHN High Speed Internet Access-per user(Daily Charge) Up to 3 meg		\$50.00		\$0.00
Additional Bandwidth-1meg or 500K per user (Daily Charge)		\$500.00		\$0.00
Static/Public IP addresses available upon request for additional charge		Call for Quote		\$0.00
No server/router/hub (wired or wireless) is allowed on iBAHN network without prior approval from Marriott/iBAHN				

TELEPHONE LINES				
	Quantity	Daily Rate	# Days	Extension
DID Line - Direct Inward Dial-Needed for Fax Machine (plus calls)		\$100.00		\$0.00
House Phone		\$75.00		\$0.00

EVENT INFORMATION		EQUIPMENT TOTAL	
Booth Name:		Equipment Total	\$0.00
Delivery Date: Time:	Event Location (Room):	Service Charge (24%)	\$ -
Show Dates:	Show Hours:	Sale Tax (8.00%)	\$ -
Pick Up Date: Time:	On Site Contact:	Total	\$0.00

EXHIBITOR INFORMATION	
A 24% Service charge and 8.00 % Sales Tax will charged for all Audio Visual Equipment.	<p>You must be present in the booth at delivery time to accept and secure equipment.</p> <p>Please return a copy of this form <u>one week</u> prior to delivery date. Prices subject to change without notice.</p>
Marriott International, Inc. - 12/5/12 - Rev. 2.8	
A 24 hour cancellation policy prior to the event will apply.	



Credit Card Authorization Form for Events

Dear Sir/Madam,

This form has been created to allow you to have third party expenses charged to your credit card. Please provide all the information requested below to ensure prompt processing of your application. We ask you to please sign and date the form before submission. Please fax the completed form to **Desert Springs JW Marriott Resort and Spa** at (760) 341-1792

Cardholder Information

Name as it appears on the credit card: _____

Card type: ☐ Visa ☐ MC ☐ Amex ☐ Diners/CB ☐ Discover ☐ JCB

Account type: ☐ Individual (personal credit card)

☐ Corporate | Company Name: _____

Account number: _____ Exp. date: _____

Address:

(where statement is mailed)

City, State and Zip: _____

Phone number: _____ Fax or alternate number: _____

Event Information

Event name: _____

Company (if applicable): _____

Phone number: _____ Fax or alternate number: _____

Event date: _____

Event Charges

Equipment	Service	Taxes (8.00%):	Total:
Rental:	Charge		
	(24%):		

All Charges:

*(Rate and tax amount must be provided by a hotel representative in order to complete this form)

I certify that all information is complete and accurate. I hereby authorize **Desert Springs JW Marriott Resort and Spa** to collect payment for all charges as indicated in the Rate Information and Approved Charges section of this form by processing a charge to the credit card listed above. Charges must not exceed _____ for the entire event. I understand that a new form will have to be completed if the guest wishes to extend their stay. I certify that I am the authorized signer of the credit card listed above.

Cardholder name: (Printed) _____

Cardholder signature: _____ Date: _____