

Booth Monitor Order Form



Advance Order Deadline: May 23rd, 2022

Show Management will provide reasonable security in the exhibit area during installation, show days, and dismantling, however many exhibitors elect to use Special Booth Monitoring Services.

These services are available at the rate of \$38.00 per hour when this form and payment for ordered services are received on or before the above Order Deadline Date, and \$43.00 per hour for all orders after the above order deadline date. A six-hour minimum per shift per security monitor is in effect.

Payment in full must accompany order.

Total Number of Hours _____ @ \$ _____ Per Hours = \$ _____

Plus 3.5% Processing fee = _____ Grand Total = \$ _____

Security Personnel should remain in booth until released Yes No Exhibitor is responsible for additional charges

If not checked our personnel will leave your booth at the designated time

Please use the area on next page to list representatives who are authorized to release our personnel

Credit Card Number _____ Expiration Date _____ Visa

Cardholders Name _____

3 Digit Security Code on back of card: _____ Amex 4 Digit Code _____ MasterCard

Cardholders Billing Address _____ Amex

City/State _____ Zip Code _____ Corporate Card

Cardholders Signature: _____ Personal Card

By signing this agreement cardholder has accepted the terms and conditions set within by the liability clause on page 3.

Email Address for CC receipt _____



Nevada PILB 1067

Please send order and payment to:

DTA Security Services, LLC

2680 Chandler Ave., Suite 4

Las Vegas NV 89120

Phone: 702-650-2298

Fax: 702-920-8340

order@dtasecurityservices.com

Page 2 DTA Booth Security Order form

Booth No _____ Company Name _____

Address _____

City _____ State _____ Zip _____ Email Address _____

Telephone _____ / _____ / _____ Ext _____ Fax _____ / _____ / _____

Authorized Company Representative _____ Date _____

Please indicate the dates and hours that you will require Special Booth Monitoring Services

Date In	Start Time	Date out	End Time	Total

AUTHORIZED TO RELEASE SECURITY OFFICER (EMERGENCY CONTACT)

In the event of an emergency, it is requested that the following persons be notified on behalf of the CLIENT.

1. _____ Telephone _____ / _____ / _____

2. _____ Telephone _____ / _____ / _____

3. _____ Telephone _____ / _____ / _____

4. _____ Telephone _____ / _____ / _____

5. _____ Telephone _____ / _____ / _____

6. _____ Telephone _____ / _____ / _____

LIABILITY

CLIENT acknowledges and agrees that neither DTA, nor its agents, are insurers of persons and/or property and that insurance, if any, covering personal injury and property loss or damage on or to the CLIENT'S premises shall be obtained by the CLIENT; that DTA is being paid for the security guard services designed to reduce certain risks of loss and that the amounts being charged by DTA are not related to the value of the property belonging to the CLIENT or others located on the CLIENT'S premises and are not sufficient to guarantee that no loss will occur; that DTA is not assuming responsibility for any losses or damages to property or for personal injury or death, whether directly or indirectly, which may occur, even if due to DTA'S negligent performance or failure to perform any obligations under this Agreement. In the event of any loss to property or injury to any person, CLIENT agrees to look exclusively to its insurer to recover for said loss.

If any person or entity commences legal action against DTA for personal injury and or property loss or damage on or to the CLIENT'S premises, DTA will only be liable for any damages to the extent of either the amount of the fee CLIENT has paid / will pay to DTA, or if the damages are covered by an insurance policy, the amount of coverage provided by the policy. Client agrees and understands that without this limitation of liability DTA would not have entered into this agreement.

CLIENT understands that the sole role of DTA at the event / events described herein is to maintain order through reasonable, lawful means and provide a visual deterrent, where necessary.. DTA is being compensated solely for this work and to deter certain risks and/or losses that could arise at, or as a consequence from the event / events described herein. Hence, the amounts being charged by DTA and paid by CLIENT are neither sufficient to, nor intended to, guarantee that the services supplied by DTA will avert or prevent occurrences, or losses therefrom.

Both CLIENT and DTA understand and agree that circumstances could arise in the course of DTA'S work as described herein, where losses of, and/or damage to CLIENT'S materials may occur, which may make it impossible or impractical to exhibit the same. Client waives any claim for consequential damages arising from such loss or damage, including but not limited to lost profits or revenues, regardless of the cause or the party responsible. .

The CLIENT, as a result of this Agreement, does not seek indemnification from DTA, nor show management, or their agents, against any damages or losses caused by hazards to the CLIENT'S property, or to the property or person of any third party while DTA is engaged in the execution of this Agreement. The signature on the other side of this form of the authorizing party requesting booth monitoring services also indicates acceptance of the conditions of this Agreement as stated above.

LATE NOTICE / CANCELLATION CHARGES

Both CLIENT and DTA understand that circumstances may arise prior to the performance of the parties to this Agreement which could require cancellation of the event for which CLIENT placed this Order with DTA. Both parties further understand that in the preparation for such events, DTA generally incurs costs associated with schedule building and staff assignment confirmations. For this reason, in such circumstances, both CLIENT and DTA agree that where CLIENT cancels a contracted-for event within fourteen (14) days of the date on which it was to proceed, CLIENT pay DTA (and DTA will accept) a Cancellation Fee in the amount of \$400.00. The Cancellation Fee will be withheld from the refund processed by DTA for CLIENT.

By signing this agreement cardholder has accepted the terms and conditions set within by the liability clause above.

Print Name: _____

Signature: _____