

Northeast Decorating & Exhibit Serv.  
 3360 Milton Avenue  
 Syracuse New York 13219  
 Phone: 315- 471- 9989  
 FAX: 315- 471- 0237  
 Email: suzi@nede.net

NAEP Upstate NY Regional Conference  
 High Peaks Resort – Lake Placid NY  
 October 2, 2019

**Equipment Rental Order Form**

Job: 3918

**IMPORTANT NOTE: ORDERS MUST BE RECEIVED BY SEPT 24, 2019**

<u>Qty</u>	<u>Description</u>			<u>Amount</u>
	<b>Wood Display Tables</b>			
_____	4'x 24" Table (Plain, w/ Vinyl Topping Only)	\$	15.00	_____
_____	6'x 24" Table " "		15.00	_____
_____	8'x 24" Table " "		15.00	_____
_____	6'x 30" Table " "		16.00	_____
_____	8'x 30" Table " "		16.00	_____
_____	Extension Legs (ONLY) to raise <u>rectangle</u> tables to 40" High – <b>Set of 4</b>		5.00	_____
_____	30" Round Cocktail Table (30"High <u>OR</u> 40"High - <b>CIRCLE HEIGHT CHOICE</b>		15.00	_____
_____	36" <u>OR</u> 48" Round Table - <b>CIRCLE CHOICE</b>		16.00	_____
	<b>Table Skirting</b> (Show Colors)			
_____	30" High Skirting	\$	20.00	_____
_____	40" High Skirting ( <b>MUST also order Extension Legs above</b> )		25.00	_____
	<b>Chairs</b>			
_____	Folding Chair	\$	6.00	_____
_____	Padded Chair		8.50	_____
_____	Bar Stool (Econo - Padded seat, no back)		25.00	_____
_____	Bar Stool (Deluxe - Padded back & seat)		35.00	_____
	<b>Carpeting: PLEASE NOTE: SHOW-SITE AREA IS CARPETED</b>			
	<b>Miscellaneous</b>			
_____	Floodlight Unit (LED on 8' upright pole)		30.00	_____
_____	Wastebasket		6.50	_____

**PAYMENT POLICY: FULL PAYMENT MUST ACCOMPANY YOUR PRE-ORDER**

Above rental prices are for the duration of the show and include delivery and pick-up of equipment to/from designated spaces. All material to remain the property of Northeast Decorating. Prices listed above cover rental only.

Sub Total: \$ \_\_\_\_\_  
 Essex County  
 8.00% Sales Tax: + \_\_\_\_\_  
 TOTAL DUE: \$ \_\_\_\_\_

\*\*\*\* **AREA BELOW MUST BE COMPLETELY FILLED IN**

BOOTH # \_\_\_\_\_

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) - \_\_\_\_\_  
 Fax: (\_\_\_\_\_) - \_\_\_\_\_

E-MAIL: \_\_\_\_\_

NAME ON CREDIT CARD: \_\_\_\_\_

& ADDRESS OFF THE CC STATEMENT \_\_\_\_\_

( ) VISA/MC/AMX: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_ CVV: \_\_\_\_\_