



EXHIBITOR REQUIREMENTS

Please complete and return this form a minimum of twenty one (21) days prior to exhibitorrequests@rna.org.au

EXHIBITOR AND STAND DETAILS					
EVENT NAME					
COMPANY NAME	MOVE IN DATE			TIME	
CONTACT NAME	MOVE OUT DA	TE	TIME		
ADDRESS					
EMAIL		STAND NO.			
ON SITE MOBILE					
PHONE / COMMS CONNECTION					
I would like to arrange a phone / comms connection and/or equipment for my stand Yes					No
ITEM	PRICE	QUANTITY	EXTRA CHARGES	TIME AN REQU	
Telephone line with handset through VoIP system (Line access through PABX BY dialing "0")	\$60.00	Call Costs			
Dedicated PSTN Line (direct line out) *** ideal for eftpos ***	\$100.00	Call Costs			
Polycom Conference Speakerphone (includes connection)	\$100.00	Call Costs			
Polycom Video Conference Kit (includes video unit, ISDN lines up to 512k, monitor and set up)	\$1,000.00		Call Costs		
	TOTAL PHONE / CONNECTION	OMMS			





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Please indicate the approximate location of service placement within the booth with an (X) and also include any neighbouring booth numbers.			Back of Stand				
If available, please provide additional documentation and/or floorplans to ensure accurate placement of services.			Left	eft Right			
If location is not provided within three working (3) days prior to show move in, the services will be place in the most convenient location and the customer is then							
responsible for the placement of services.			Front of Stand				
,							
I authorize the RNA to charge the following credit card				Yes		No	
	TOTAL CHAGES TO CREDIT CARD						
Credit Card Type	AMEX (SURCHARGE APPLIES)	VISA		MASTERC	ARD		
Cardholder Name			Expir	y Date			
Card Number			CCV				
Signature							