



116 Marion Road, Cincinnati, OH 45215  
 Ph (513) 772-1898 Fax (513) 322-4473  
 www.academyexpo.com

## FORK LIFT ORDER FORM

August 19th - 21st, 2022

# HOUSE & OUTDOOR LIVING SHOW

Sharonville Convention Center

Fork Lift Deadline Date: Wednesday, August 10th, 2022

Please FAX completed form to 513-322-4473 or email to [critchie@academyexpo.com](mailto:critchie@academyexpo.com) by Wed., August 10h, 2022

COMPANY NAME		BOOTH NUMBER
ADDRESS		
CITY	STATE	ZIP
PHONE	EMAIL	

### PRICE LIST

DESCRIPTION	Pre-Order PRICE	DESCRIPTION
<b>Fork Lift Rental</b>		<b>Fork Lift Schedule</b>
Academy Operator must be used when ordering Fork Lift		Pre - order forklift rental for service during these hours only
<b>1/2 Hour Minimum</b>		<b>Set-up</b>
Fork Lift with Operator 1/2 Hour	\$ 75.00	Thursday, August 18th 8am-6pm
Fork Lift with Operator 1 Hour	\$ 150.00	Friday, August 19th 8am-12pm
<b>1 Hour Minimum</b>		<b>Teardown</b>
Fork Lift with Operator Sunday 8/21	\$200.00	Sunday August 21st 5-8:30pm
		Monday, August 22nd 8am-1pm

### PLACE ORDER HERE

DESCRIPTION	LENGTH OF TIME	DATE NEEDED	PRICE	TOTAL PRICE
<b>Fork Lift Rental</b>				\$
				\$
				\$
				\$
I Agree in placing this order that I have accepted Academy's Payment Policy and Academy's Terms & Conditions of Contract.			All Items Ordered	\$
			7.8% Rental Tax	\$
			3% CC Convenience Fee	\$
			<b>Total Payment</b>	<b>\$</b>

Credit Card Type	Exp Date
Credit Card Number	CVV#
Name on Card	
Billing Address on Credit Card	
Authorized Signature	<b>X</b>

ACADEMY EXPO, 116 MARION ROAD, CINCINNATI, OH 45215

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# HOUSE & OUTDOOR LIVING SHOW

## ADDITIONAL EQUIPMENT ORDER FORM

August 19<sup>th</sup>-21<sup>st</sup>, 2022 ~ Sharonville Convention Center

**1.** Complete & fax to (513) 322-4473 or to Cindy's email: [critchie@academyexpo.com](mailto:critchie@academyexpo.com) by the DEADLINE for discounted prices. Academy will email a contract & charge slip to confirm receipt of your order. After the deadline, the higher prices in last column apply and some equipment will not be available, shown as N/A.

**PRE SHOW DISCOUNT DEADLINE – ORDER BY Wednesday, August 10<sup>th</sup>, 2022**

**2.** Your booth includes PIPE & DRAPE ONLY. Use this form to order equipment for your booth.

**3.** Complete the following area if you want to rent any equipment to be ADDED to your booth:

<u>EQUIPMENT</u>	<u>Discounted</u> <u>PRICES</u>	<u>QTY</u>	<u>\$ TOTAL</u>	<b>After</b> <b>Aug 10th</b> <b>Deadline</b> <b>PRICES</b>
8' x 30" Table, covered & skirted (show colors)	\$60.00	X		<u>\$ 120.00</u>
6' x 30" Table, covered & skirted (show colors)	\$50.00	X		<u>\$ 100.00</u>
6' or 8' TALL table (40") cover/skirt (show colors)	\$70.00	X		<u>N/A</u>
30" Round Table with White Linen	\$40.00	X		<u>N/A</u>
30" Round TALL Table with White Linen	\$45.00	X		<u>N/A</u>
Any size, plain table (Indicate size: _____ )	\$30.00	X		<u>\$ 60.00</u>
Folding Chair, black	\$ 10.00	X		<u>\$ 20.00</u>
6' x 18" Table, covered & skirted (show colors)	\$50.00	X		<u>N/A</u>
4' x 24" Table, covered & skirted (show colors)	\$45.00	X		<u>N/A</u>
Carpet, per Single booth space- (show colors)	\$100.00	X		<u>\$ 200.00</u>
Carpet Padding, per Single booth space	\$45.00	X		<u>N/A</u>
Wastecan	\$15.00	X		<u>N/A</u>

(Show color skirting is BLACK with a WHITE table cover. Show color carpet is BLACK.)

**4.** Complete payment information, Credit Card Only, All Credit Cards Accepted:

Credit Card Type _____	Subtotal	\$ _____
Card # _____	Tax (7.8%)	\$ _____
Card Expiration Date _____ CVV# _____	3% CC Fee	\$ _____
Name on Card _____		
Card Billing Address, State & Zip _____		

**Total Due** \$ \_\_\_\_\_

**5.** Complete information, sign & fax this form:

Your Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Phone # \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Email \_\_\_\_\_  
**YOUR BOOTH#** \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

# HOUSE & OUTDOOR LIVING SHOW

## MATERIAL HANDLING / DRAYAGE INSTRUCTIONS & CHECKLIST

\_\_\_\_\_ 1. You are responsible for contacting a carrier and scheduling your shipment to us. Shipments are NOT accepted at the show site, unless pre-scheduled with Academy. Drayage charges apply.

\_\_\_\_\_ 2. Clearly address each container to: **Academy Expo**  
**House & Outdoor Living Show 2022**  
**"Your Name & Booth Number"**  
116 Marion Road, Cincinnati, OH 45215  
Phone (513) 772-1898 Fax (513) 322-4473

\_\_\_\_\_ 3. Payment by credit card only. All Credit cards accepted.

\_\_\_\_\_ 4. Total number of containers (#): \_\_\_\_\_

\_\_\_\_\_ 5. Rates: \$ 1.00 per pound

(Minimum payment required \$40.00 for 1- 40lbs.)

Total weight of packages shipped to Academy (lbs) : \_\_\_\_\_

Total amount due (\$): \_\_\_\_\_

\_\_\_\_\_ 6. Your Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company City / State / Zipcode: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_

Your Booth #: \_\_\_\_\_

**7. DEADLINE: All material must arrive on or before**

**Wednesday, August 10<sup>th</sup>, 2022**

**Shipments received after the deadline will incur a \$125.00 late fee.**

\_\_\_\_\_ 8. Academy will store & deliver your container(s) to your booth at the meeting site.

We are not responsible for any unpacking, repackaging, setup or breakdown of materials.

\_\_\_\_\_ 9. \*\*\* Affix your carriers PREPAID shipping return labels & our "Return Drayage Form" to your returning packages, then CALL your carrier to schedule a pickup from our warehouse on either TUESDAY, August 23rd or WEDNESDAY, August 24<sup>th</sup>, 2022.

\_\_\_\_\_ 10. Fax this completed, signed form to # (513) 322-4473 with your credit card information:

CREDIT CARD TYPE \_\_\_\_\_ CREDIT CARD EXP DATE \_\_\_\_\_ CVV# \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_

NAME as it appears ON CARD \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

BILLING STATE / ZIP \_\_\_\_\_

Person responsible for this information and its execution:

Name

Title

Date

Questions? Contact Cindy Ritchie by phone# 513-772-1898 or email: [critchie@academyexpo.com](mailto:critchie@academyexpo.com)

# HOUSE & OUTDOOR LIVING SHOW

## RETURN DRAYAGE FORM

MY COMPANY NAME \_\_\_\_\_

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

MY RETURN PACKAGES ARE SHIPPING TO:

COMPANY \_\_\_\_\_

ATTN: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

# of boxes returned \_\_\_\_\_

Approximate total weight \_\_\_\_\_

Name of Carrier \_\_\_\_\_

**PLEASE** attach your completed, **pre-paid shipping labels** to each of the packages you are returning, with **this form** and **call your carrier to schedule pickup** from Academy Expo.

**\*\*\*\* Please be sure to complete this form and attach it, with your pre-paid shipping labels, to your boxes to ensure a prompt return.**

Questions? Contact Cindy Ritchie by phone# 513-772-1898 or email: [critchie@academyexpo.com](mailto:critchie@academyexpo.com)

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