## **CLEANING SERVICES ORDER FORM**

FOR QUESTIONS ON THIS FORM, PLEASE CONTACT YOUR EVENT MANAGER



## **EVENT INFORMATION**

Event Name:			Date of Event: Booth #:			
Order Completed by:			Phone Number:			
Business Name:			On-Site Contact:			
Address:			On-Site Cell Phone:			
City:	State:	Zip:	On-Site Email:			

## **SERVICES**

CLEANING SERVICES (Please only select one of the services listed below)	# OF DAYS OF SERVICE	BOOTH SQ. FT. (L X W)	ADVANCE RATE (PER SQ. FT.) MORE THAN 14 DAYS NOTICE	STANDARD RATE (PER SQ. FT.) LESS THAN 14 DAYS NOTICE	TOTAL (# DAYS x SQ. FT. x RATE)
Initial Vacuum Only (Prior to first show day only)			\$.25	\$1.00	\$
Daily Vacuum (Prior to each show day)			\$1.00	\$2.00	\$
GRAND TOTAL					\$

## **PAYMENT INFORMATION**

TO PAY BY CREDIT CARD: PLEASE COMPLETE THE INFORMATION BELOW AND SEND FORM TO						
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