



Booth Service Order Form



Internet – Network Services

Service	Quantity	Rate	Item Total
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Wireless Services

On-Site Wireless Services 1 Dynamic IP Address LAN Isolated				WIFI Services available on NJEXPO Marketplace
On-Site				
4 Hour		\$8.00		
24 Hour		\$20.00		
48 Hour		\$40.00		
96 Hour		\$55.00		

Wired Services- Installation Charges are additional

Orders for Wired Services within 14 days of move in day are subject to 25% late fee

1 Dynamic IP Address LAN Isolated		\$350	
1 Static Internal IP Address Internal VLAN for 6 Hosts		\$495 \$1,995	
1 Static Public External IP Address for Length of Show		\$2,000	
Site-To-Site VPN		Call for Pricing	

Equipment - Does Not include Wired Connectivity

8 Port Unmanaged GB Switch		\$35	
24 Port Unmanaged GB Switch		\$75	
Cat 6 50 Foot Patch Cable		\$15	

Engineering

Dedicated 300 GBPS Internet Service		Call For Pricing	
Installation/On---Site Support		\$135 Per Hour	
Network Services Fee		Call for Pricing	

Telephone Services

VOIP Phone with DID and Unlimited Local/Long Distance		\$199	
ATA Analog Connectivity for Credit Card Processing/Fax		\$75	

Wired Services can be ordered online at www.onsdigital.com/njexpo or emailed to sales@onsdigital.com. Call 866-464-6410 with questions or technical support

Sub Total	
Tax (6.625%)	
Total	

Booth Information Form



Only required if you have selected Wired or Telephony Service.
Not Required for Wireless Services.

Show Name: _____	Show Dates: \ \ .
Vendor Name: _____	Booth #: _____
Arrival Date: \ \ .	Breakdown Date: \ \ .

Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Credit Card Information	
Card Type:	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____	
Card Number: _____	
Expiration Date (mm/yy): _____	
Cardholder ZIP Code (from credit card billing address): _____	

I, _____, authorize _____ to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Customer Signature

Date