



# Audio Visual Equipment Request

For Security reasons, this form is to be mailed or faxed. If you must email this form, please send to [KeystoneConfServices@vailresorts.com](mailto:KeystoneConfServices@vailresorts.com) without credit card information and then call 970-496-4142 to provide credit card information

**\*ALL RENTALS BASED ON AVAILABILITY**

DESCRIPTION	COST/DAY	QUANTITY	DAYS	TOTAL COST
40" HD LCD Television (built in speakers) W/Floor Stand	\$300.00			
52" HD LCD Television (built in speakers) W/Floor Stand	\$400.00			
SafeLock / Projection Cart	\$25.00			
LCD Data Projector (1080P , 4500 Lumens)	\$480.00			
LCD Projection Package (1080P, tripod screen, necessary cables)	\$500.00			
Flipchart w/ Pad, Paper, and Markers	\$50.00			
Flipchart Easel Only	\$25.00			
Tripod Screen	\$45.00			
<b>Computer Equipment</b>				
Computer Systems	Upon Request			
24" LCD Flat Panel	\$150.00			
Wired Internet Line At Least 5Mb/s 2 Public IP address with DHCP, No Firewall	\$400.00			
Wireless Internet provided by WanderingWifi, Purchase online through splash page onsite	\$9.95	N/A	N/A	N/A
<b>Additional Equipment:</b>				

CONFERENCE NAME : \_\_\_\_\_ CONFERENCE DATE(S): \_\_\_\_\_

YOUR EXHIBITING FIRM NAME: \_\_\_\_\_ ON SITE CONTACT: \_\_\_\_\_

BOOTH NUMBER: \_\_\_\_\_ EXHIBIT ROOM: \_\_\_\_\_ DATES OF SERVICE REQUESTED \_\_\_\_\_

EXHIBITOR ADDRESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

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

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

**PAYMENT:**

CREDIT CARD NUMBER:

EXP. DATE  
MONTH / YEAR

CCV/Security Code

\*\* I authorize charging any unpaid balance to my credit card

\_\_\_\_\_  
CARD HOLDER SIGNATURE

\_\_\_\_\_  
PRINT NAME

Email Address: \_\_\_\_\_

\*\*To receive a receipt please fill in the email address above