



EVENT: **AHCA/NCAL Annual Convention 2019**

E X H I B I T O R	EXHIBITING COMPANY: _____	BOOTH #: _____
	PHONE: _____ FAX: _____	BOOTH SIZE: _____ X _____
	ADDRESS: _____	BOOTH TYPE:
	CITY: _____ STATE: _____	<input type="checkbox"/> INLINE <input type="checkbox"/> ISLAND
	ZIP CODE/PROVIDENCE: _____ COUNTRY: _____	<input type="checkbox"/> PENINSULA <input type="checkbox"/> OTHER
B I L L I N G	BILL-TO COMPANY (IF DIFFERENT): _____	I AM:
	ORDER CONTACT NAME: _____	<input type="checkbox"/> THE EXHIBITOR
	ADDRESS: _____	<input type="checkbox"/> A 3RD PARTY (EAC/I&D):
	CITY: _____ STATE: _____	
	ZIP CODE/PROVIDENCE: _____ COUNTRY: _____	
	PHONE: _____ FAX: _____	
	ORDER CONTACT EMAIL: _____ EMAIL FOR INVOICES: _____	

****THIS FORM MUST BE INCLUDED IN YOUR ORDER SUBMISSION OR YOUR ORDER WILL NOT BE PROCESSED****

AHCA/NCAL Annual Convention 2019

Incentive Deadline Date: September 19th, 2019

To qualify for incentive rates, all order forms, this Method of Payment form and a finalized booth diagram must be received by: **September 19th, 2019**

Place Your Order Online or Via Email or Fax:

Order Online: www.occc.net/exhibitor

Email Forms: exhibitor.services@occc.net

Send Via Fax: (407) 685-9884

Call: (800) 345-9898

OCCE Mailing Address:

Orange County Convention Center
ATTN: Exhibitor Services
9860 Universal Blvd.
Orlando, FL 32819-8199

☐ **COMPANY CHECK**

Checks must accompany your order submission and must be received, not postmarked, by the incentive deadline. Make check payable to Orange County Convention Center. Checks must be US funds drawn from a US bank. Please include your show name and booth number on check.

☐ **ELECTRONIC FUNDS TRANSFER**

OCCE accepts both wire transfers and ACH payments. Payment must be cleared, not sent, by the incentive deadline. It is the exhibitor's responsibility to verify with their Initiating Bank that all fees are included in their payment. Please contact Exhibitor Services for payment instructions.

***ACH Payments now available Online**

☐ **CREDIT / DEBIT CARD**

OCCE will charge your credit/debit card in full for your advance order and any additional charges for onsite changes or additions. Please complete all of the information below if using a credit/debit card:

CARD TYPE: ☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS

CARD NUMBER: _____ **EXPIRATION DATE:** _____ **SECURITY CODE:** _____

CARDHOLDER NAME: _____

BILLING ADDRESS: _____

I, the undersigned cardholder, by submitting an order to the OCCE, acknowledge and agree to all OCCE Terms & Conditions and give the Orange County Convention Center authorization to charge my credit card for the following services: electricity, rigging labor and equipment, lighting, plumbing, compressed air, propane & natural gas, cable TV and/or firewatches.

SIGNATURE: _____ **DATE:** _____

I further authorize the following named person(s) to approve additional charges on the above card on show site as deemed necessary by said person(s):

NAME: _____ **SIGNATURE:** _____

NAME: _____ **SIGNATURE:** _____

NAME: _____ **SIGNATURE:** _____