

Payment Options

Please note, we require a completed Credit Card Authorization form on file regardless of your preferred method of payment.

■ Payment by Credit Card

For your convenience, we accept MasterCard, Visa and American Express. Please complete and submit Champion's Credit Card Authorization form along with your orders when you are mailing or faxing them in.

■ Payment by Company Check

Please mail your check along with your order forms to Champion Exposition Services at the address listed below. If you are faxing your order forms, please include a signed Credit Card Authorization form and a photocopy of your check. Your orders will be processed immediately upon receipt of your original check. Checks must include Exhibiting Company Name, Booth Number and Name of Show.

■ Payment by Wire Transfer

Please contact Champion directly for wire payment details.

■ Payment by Third Party

If Champion will be invoicing a third party, please complete and submit the Third Party Payment Authorization form. Please note, the exhibiting firm is ultimately responsible for payment of all charges by show closing.

■ International Exhibitors

International exhibitors must make payment to Champion for all amounts due in U.S. funds prior to show closing.

Payment Policy

■ General

In order for us to process your orders, we must have your signed Credit Card Authorization form and full payment in advance of the show. Final invoices will be prepared at the Champion Service Desk for your review at show site.

■ Tax Exempt Status

If you claim tax exempt status, please submit a copy of your Tax Exempt Certificate issued by the federal government or state in which your event is taking place with your initial order.

■ Credits for Billing Discrepancies

All billing discrepancies must be resolved with Champion within 30 days from the close of the show.

■ Discount Pricing

To qualify for discount prices, full payment must be included with your order on or before the discount deadline date.

■ Standard Pricing

Order forms submitted after the advance discount deadline date will be processed at the standard prices.

■ Cancellation of Items or Services

Twenty-four (24) hour notice is required for cancellation of all labor services. If such notice is not provided a one hour minimum per laborer ordered will be charged. Items ordered and delivered but subsequently cancelled will be charged at 50% of the price of the item.

Credit Card Authorization

Web 2.0 Expo - Booths
September 28 - 30, 2010

| | | | |
|-------------------|-------|---------------|---------|
| Company Name | | Booth Number | |
| Street Address | | | |
| City | State | Zip | Country |
| Contact Name | | Email Address | |
| Telephone () | | Fax () | |

Required-please submit with first order

Credit Card Payment

- Please read Payment Options and Policy page.
- This Credit Card Authorization **MUST** be on file with Champion Exposition Services before any goods or services will be rendered regardless of your preferred method of payment.
- All accounts must be settled at Champion's Service Desk on show site prior to the close of the show. Your credit card will be processed for any current or previous outstanding balance at that time.
- This form is to be completed by the Exhibiting Company. If you are a Third Party, you must complete the Third Party Payment Authorization form.
- **All billing discrepancies must be resolved with Champion within 30 days from the close of the show.**

Credit Card Authorization

- Please complete information below and submit with your initial order.
- Incomplete and/or unsigned forms can not be accepted.

| | | | |
|---|-------------------------------------|-------------------------------|------------------------|
| Card Type | | | |
| <input type="checkbox"/> American Express | <input type="checkbox"/> MasterCard | <input type="checkbox"/> Visa | |
| Account Number | | | Expiration Date |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| CARDHOLDER'S NAME (PLEASE PRINT) | | | |
| BILLING ADDRESS | | | |
| CITY | STATE | ZIP | COUNTRY |
| TELEPHONE | FAX | | |
| () | () | | |

PLEASE SIGN 

