Event Name: _____

Vendor Name: _____ **Vendor Email:** _____

Vendor Address: _____ **Vendor Phone:** _____

All Exhibitors must complete, sign, and return this form by: **Date equal to (7) days prior to arrival**

Shipments cannot be received before: **Date equal to (3) days prior to first day of event**

○ Charge to guestroom under the following name:

○ I will pay via credit card. Send me a link via Sertifi.

Receipts will be emailed at the conclusion of the event to the email address provided above

Ship all packages to:

Amanda Malotte

ATTN: **Group Name – Vendor Name**

1107 Jamboree Road

Newport Beach, CA 92660

The following charges apply. Charged each way, receiving in and shipping out.

$5.00   per envelope

$20.00   per box

$150.00   per pallet

# of Packages	Carrier & Tracking Number	Scheduled Delivery Date	Scheduled Pick Up Date	Vendor Signature	Hotel Use: Bqt Captain Initials