

International Test Conference

Security Order Form
Individual Booth Security
Deadline: October 5, 2007

Santa Clara Convention Center • October 19 – 27, 2007

Show Management acknowledges it has the responsibility for show security, BUT also recognizes that the exhibitor's equipment and property are under his/her own custody and control. Reasonable care will be taken to provide safe-keeping for the equipment and merchandise. Maloney Security, Inc. accepts no responsibility for any damage to or for loss or destruction of an exhibit, or for the property of an exhibitor, his/her agents or employees, either from fires, theft, accidents or other causes, or injury to any persons resulting from such causes. Any scheduling conflicts must be discussed onsite with the onsite manager before completion of event. Maloney Security, Inc. has been selected as your official security contractor. If you desire Individual Booth Security Service, please complete the following:

	# of Guards:	Date From:	Hour From:	Hour To:	Date To:	Total Hours:
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____	_____
TOTALS:		Total Hours:	_____ X	Rate per hour:	\$ _____ =	\$ _____

Credit card orders are \$34.00 an hour per security officer if received by the **Deadline Date of October 5, 2007**. **Cash/check discount orders** are \$28.00 an hour if check/cash and order are received by the deadline date. All **post-deadline orders** are \$44.00. Our minimum call is four consecutive hours per security officer. Holidays are factored at double-time. Overtime rates may apply if client holds a security officer past shift. Personnel will not leave until released by client. You may email your order to events@maloneysecurityinc.com.

Please include a floor plan with your order.

Exhibiting Company: _____
Street Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____ Email: _____
Person Completing Form: _____ Booth #: _____
Authorized Signature: _____ Print Name: _____
Representative Onsite: _____ Cell: _____
Specify Needs and Concerns: _____

Credit card information must be submitted with booth form. Additional hours will be charged to your card.

Credit card information (check one): VISA MASTERCARD AMEX
Card Number: _____ Expiration Date: _____
Cardholder Name: _____ CVN Code: _____
The CVN Code is the last 3-digit number on the back of VISA/MasterCard; a 4-digit number on the front of AMEX cards.
Signature: _____ Date: _____

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