



# Somerset Folk Harp Festival

July 26-29, 2012  
Hilton Parsippany  
Parsippany NJ  
[www.somersettharpfest.com](http://www.somersettharpfest.com)

## EXHIBITOR RATE SHEET

**EXHIBIT HALL OPENS FRIDAY AT 11AM AND CLOSSES SUNDAY AT 3PM**

Please call and discuss booth availability before sending the contract. **While there is no deadline, the best booths in the best locations will go quickly.**

### Booth Specifications

**Non-refundable deposit of \$250 per booth required**

**Size:** 10'x10'

**Cost:** \$495 each *2011 vendors are friends of the festival: take off \$50 per booth.*

**Corner booths:** available with minimum 2-booth purchase *plus* \$50. Include with deposit. Limited number. First come-first served.

**Location:** All booths are inside the exhibit hall. Festival director will assign all spaces and reserves the right to reassign spaces.

**Furniture:** It is **included** this year at no additional charge for the first 25 vendors. Each vendor is entitled to two tables and chairs.

**Electricity & phone hookup:** available for additional charge from the hotel. See the Hilton Service Order form on the next 2 pages.

**Decorator services:** please note that we **are** including pipe & drape this year.

**Content:** Display must be orderly and blend in with the folk harp theme of our festival.

**Sharing:** 2 exhibitors may share a booth with the consent of the festival director. Only those exhibitors whose names are on the contract are permitted to exhibit in the assigned booth.

### Table Space

**Cost:** \$250 each. **Non-refundable deposit of \$250 per space required.**

**Location:** Table spaces are generally located outside the exhibit hall in the festival lobby.

**Furniture:** one table and chair is included.

**Electricity & phone hookup:** not guaranteed to be available depending on location.

**Content:** tables are intended for vendors with one or two products to exhibit/sell.

**Sharing:** no sharing for table space.

### STORAGE SPACE

Harp cases and boxes can be stowed in one of the parlors directly outside the exhibit hall area.

**WEBSITE SPACE:** all vendors and their logos and links are included on our website.

**PAYMENT DEADLINE:** full payment on the balance is due by **April 1, 2012.**



### The Somerset Folk Harp Festival

Kathy DeAngelo, Director

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# Hilton Parsippany

## SERVICE ORDER FORM

(Return this form with check payable to the Hilton Parsippany at One Hilton Court, Parsippany, NJ 07054 or use the attached credit card authorization and send a copy of the front and back of your credit card. You can fax your completed forms to 973-984-2896.)

Company \_\_\_\_\_

Today's Date: \_\_\_\_\_

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

Function Date: \_\_\_\_\_

Telephone: \_\_\_\_\_

Start Time: \_\_\_\_\_

Fax #: \_\_\_\_\_

Clean-up Time: \_\_\_\_\_

Booth # \_\_\_\_\_

Contact Name (print) \_\_\_\_\_

ITEM	QUANTITY	PRICE	TOTAL
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### 115 VAC

20 Amp	_____	\$75.00/Day	_____
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60 Amp Distribution Panel (6-20amp circuits)	_____	\$85.00/Day	_____
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### 208 VAC Single Phase

20 Amp	_____	\$150.00/Day	_____
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100 Amp 3 Phase Cam Lock	_____	\$300.00/Day	_____
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200 Amp 3 Phase Cam Lock	_____	\$600.00/Day	_____
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(Production Company To Provide Their Own Distribution Panels, Cords, Etc. For 100 Amp and 200 Amp Drops)

### PHONE REQUEST

House phone + 9*	_____	\$75.00/Day	_____
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DID line**	_____	\$100.00/Day	_____
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Wireless Internet***	_____	\$50.00/Per IP Address/Day	_____
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(only wireless offered for Vendors)

SubTotal: \_\_\_\_\_

X # Days \_\_\_\_\_

7% Tax \_\_\_\_\_

**Total** \_\_\_\_\_

\*House +9: Used for outside phone calls. All incoming calls through hotel PBX only.

\*\* DID Line: Used for incoming or outgoing calls without the use of the hotel operator.

\*\*\*Internet Line: This is line provides immediate Internet connection; ETHERNET CARD REQUIRED.

**Note: NO POWER WILL BE CONNECTED TO EQUIPMENT THAT DOES NOT CONFORM TO NJ ELECTRICAL CODE**

**ALL REQUESTS MUST BE SUBMITTED 5 DAYS PRIOR OR AN ADDITIONAL 25% SURCHARGE WILL APPLY.**

**CREDIT CARD AUTHORIZATION FORM**

I ..... hereby authorize the Hilton Parsippany to charge my credit card for the following charges:

- \_\_\_ All Charges
- \_\_\_ Room & Tax
- \_\_\_ Banquet & A/V Changes
- \_\_\_ Incidental Charges
- \_\_\_ Restaurant Charges
- \_\_\_ Business Center
- \_\_\_ Other: \_\_\_\_\_

Group/Company/Meeting Name: \_\_\_\_\_

Sleeping Reservation Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Meeting Room Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Total Estimated Charges: \_\_\_\_\_

Credit Card Type \_\_\_AX \_\_\_VI \_\_\_MC \_\_\_DC \_\_\_DN \_\_\_\_\_ OTHER

Name As It Appears On Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature: \_\_\_\_\_

***In addition to this form, please fax a legible copy (front & back of your credit card)***

**Hotel Use Only:**

Sales File Copy

Accounting Copy – Koren Kardos

Sales Manager: \_\_\_\_\_

Catering Manager: \_\_\_\_\_