



Exhibitor Information & Pricing Sheet

We look forward to welcoming you to The DoubleTree by Hilton Burlington, Vermont and are here to help you with whatever you may need in order to have a successful event at our hotel. To fully understand the services we offer, and for us to be prepared for your needs upon arrival, please complete the following electric and shipping information below.

Completed forms and credit card authorizations should be emailed to:
Jennifer at jennifer.lilyquist@hilton.com or faxed to 802-865-6613
phone: 802-865-6662

Electrical & Audiovisual Needs

- ☐ Basic Booth: up to 5 amps (lighting, laptop & T.V.) - \$30 per day
- ☐ Basic Booth Plus: dedicated 15 amp circuit (extra lighting and additional power needs) - \$35 per day
- ☐ Power Strip: \$15 per day
- ☐ HSIA Wired: \$175 per device (if you need hard wired high speed please contact the hotel)
- ☐ HSIA Wireless: \$45 per device

***The VSDS will provide standard Wi-Fi access to all exhibitors.**

Dates of requested service: _____

Total Cost: \$_____

***Please contact the hotel for additional circuits or for any other electrical requests**

***We encourage all booth lighting to be LED**

***Any requests made within 24 hours of the event date are not guaranteed**

Shipping & Handling Information

***There will not be a show decorator for shipping. Therefore, vendors have the option of shipping product or equipment directly to the hotel. There is limited storage so plan arrangements early. The hotel can begin receiving shipments on Monday, Sept. 18th. The following fees apply.**

1-50 lbs. - \$25 - Number of Packages _____

51-100 lbs. - \$35 - Number of Packages _____

100+ lbs. - \$60 - Number of Packages _____

Pallets and Crates* - \$150 each

Total Cost \$_____

**Please include this information when shipping packages to: The DoubleTree by Hilton Burlington Vermont
c/o Vermont Dental Conference Sept. 21-22, 2023
c/o Company Name & Representative Name)
870 Williston Road. So. Burlington, VT 05403**

***Please note this is subject to change based on the receiving and handling requirements per crate. *Any package delivered or picked up more than 3 business days before or after an event will be charged a \$10 storage fee per day. *All packages will be delivered to a central location/package pickup station the morning of setup day (Wed. 9/20). See the VSDS Event Staff at the event registration desk for location pick up.**



DoubleTree by Hilton Hotel Burlington Vermont

Credit Card Payment Authorization Form

Please complete all areas below. Incomplete requests may be rejected. This form must be received at least 5 business days prior to the Check-In, or by specified date in Event Contract, to ensure acceptance of the credit card to be charged. Do not send completed form by email. FAX COMPLETED FORM TO: +1 802 865 6613

ATTN: _____

Date: _____

CARDHOLDER - Please complete the following section and sign/date below.

Group or Event Name: Vermont Dental Conference	
Check-In / Event Date: Wednesday, September 20th set up & Event Dates: September 21-22, 2023	
Name of Onsite Contact:	Email:
Cardholder Name as it Appears on Credit Card:	
Cardholder Billing Address:	
City:	State: Zip:
Daytime /Business Telephone:	Evening Telephone:
Credit Card Number:	Expiration Date:
Credit Card Type: (Check one)	
<input type="checkbox"/> American Express	<input type="checkbox"/> Discover <input type="checkbox"/> JCB <input type="checkbox"/> Diners Club <input type="checkbox"/> Visa/MasterCard
Credit Card Issuing Bank Name:	Bank Phone Number (from back of your credit card):
I agree to cover the above categories of charges up to a Maximum Amount of \$ _____	
DIRECT BILL ACCOUNT PAYMENTS ONLY: (For direct billing customers paying by credit card)	
Name on Invoice/Statement _____	Date on Invoice/Statement _____
Invoice/Statement Number _____	Authorized Amount \$ _____

Note: Charges for room and tax, group deposits or direct bill account payments will be charged to your credit card immediately. Any incidental charges circled above will be charged at the time of check-out.

Amount to be immediately charged to credit card for room and taxes or deposit: \$ _____

Final Balance Billed to Credit Card (**hotel use only**): \$ _____

By signing below, you authorize the hotel to charge your credit card immediately for the amount indicated above up to the "Maximum Amount" indicated above. You further acknowledge that if "all charges" has been selected, then all guest/group related charges (less Deposit) will be charged to the above card number at the time of check-out or event conclusion.

Cardholder Signature: _____

Date: _____