



ELECTRICAL SERVICE ORDER FORM

Exhibitor:	Name of Event:	<u>MN Indigenous Language Symposium</u>
Address:	Date of Event:	<u>May 18 - 19, 2009</u>
City, State, Zip:	Northland Contact:	<u>Jen Bulen</u>
Phone Number:	Phone Number:	<u>763-536-8300 ext. 6359</u>
On Site Contact:	Fax Number:	<u>763-533-6607</u>
	Northland Planning Manager	<u>Cathy Harju, 763-971-5572</u>

The Northland Inn offers electrical service by **PREPAID request only**.
 STANDARD EXHIBIT ELECTRICAL SERVICE is defined as 110 volt AC power up to 500 watts (5 amps) per booth. Higher wattage service requires dedicated 20 amp circuits.

**OTHER ELECTRICAL SERVICE: (220 volts, 3 phase, etc.) is available. Call Cathy Harju at (763) 971-5572 with specifications for pricing.

List equipment requiring power including wattage or amps: _____

I AM REQUESTING:

(Prices include 6.9% Minnesota Sales Tax)

<input type="checkbox"/> 500 Watt Service (5 Amps)	\$53.45 / for	<u>2</u> days =	\$ <u>53.45</u>
<input type="checkbox"/> Dedicated 20 Amp Circuit	\$80.18 / day x	_____ of days =	\$ _____

SERVICE ACCESSORIES

<input type="checkbox"/> Extension Cord	\$10.69 / day x	_____ of days =	\$ _____
<input type="checkbox"/> Power Strip	\$10.69 / day x	_____ of days =	\$ _____
<input type="checkbox"/> Power Strip (surge protected)	\$16.35 / day x	_____ of days =	\$ _____
<input type="checkbox"/> Telephone Line (analog)	\$32.07 / day x	_____ of days =	\$ _____
<input type="checkbox"/> Hi Speed Internet Access	\$9.95 (no tax)	_____ of days =	\$ _____
WIRELESS			

TOTAL \$ _____

CREDIT CARD INFORMATION

Please circle card type:    

Name on card: _____
 Card Number: _____
 Expiration Date: _____

I authorize these charges to my credit card: _____

CHECKS: Checks payable to **The Northland Inn** can be mailed to: Attn: Cathy Harju
 The Northland Inn/Executive Offices
 7025 Northland Drive
 Brooklyn Park, MN 55428

FAX: Orders may be faxed to: (763) 533-6607 or e-mailed to jbullen@benchmarkmanagement.com

RETURN THIS FORM 10 days before event to make your request.