



## Booth Security Order Form

Please direct questions and orders to:

Mark R Moss  
M2 Conference Services (M2CS)  
677 FM 3356  
Van Alstyne, TX 75495  
404.408.3989  
MarkRMoss@gmail.com

### **Requesting Firm's Name and Information:**

Company Name: \_\_\_\_\_ Booth Number: \_\_\_\_\_

Address: \_\_\_\_\_ Location: Ernest N. Morial Convention Center

Company Phone: \_\_\_\_\_

Key Contact Name: \_\_\_\_\_ Key Contact Phone/email: \_\_\_\_\_

On Site Contact and Mobile #: \_\_\_\_\_ On Site Contact email: \_\_\_\_\_

**Rates:** Orders made before May 15, 2025 = \$60 per hour  
Orders made between May 15 and May 23, 2025 = \$65 per hour  
Orders made after May 23, 2025 = \$75 per hour

- Note: the minimum shift is 6.0 hours

**Please** indicate whether the guard should be relieved at the end of the contracted shift by a Company Representation. Otherwise, they will walk off at the end of the scheduled shift. Yes \_\_\_\_ No \_\_\_\_

### **Requested Booth Coverage Schedule:**

Day/Date: _____	Start Time: _____	Day/Date: _____	End Time: _____	TTL Hrs _____
Day/Date: _____	Start Time: _____	Day/Date: _____	End Time: _____	TTL Hrs _____
Day/Date: _____	Start Time: _____	Day/Date: _____	End Time: _____	TTL Hrs _____
Day/Date: _____	Start Time: _____	Day/Date: _____	End Time: _____	TTL Hrs _____
Day/Date: _____	Start Time: _____	Day/Date: _____	End Time: _____	TTL Hrs _____
Day/Date: _____	Start Time: _____	Day/Date: _____	End Time: _____	TTL Hrs _____
Day/Date: _____	Start Time: _____	Day/Date: _____	End Time: _____	TTL Hrs _____
Day/Date: _____	Start Time: _____	Day/Date: _____	End Time: _____	TTL Hrs _____

Total Hours: \_\_\_\_\_

Applied Rate: \$ \_\_\_\_\_

Sub Total: \$ \_\_\_\_\_

Add 5% Service Charge for Credit Card Orders: \$ \_\_\_\_\_

Total Paid for Order: \$ \_\_\_\_\_

**Payment Method:**

Choose Payment Option: Check \_\_\_\_\_ Visa \_\_\_\_\_ MC \_\_\_\_\_ AMEX: \_\_\_\_\_

If paying by Credit card, is the card a: Company Card \_\_\_\_\_ Personal Card \_\_\_\_\_

Card Holder Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

**Terms and Conditions:**

- 1> Full Payment must be received prior to processing the Booth Order Form.
- 2> There is a 6.0 hour minimum shift.
- 3> Client shall protect, indemnify, and hold harmless Mark R Moss / M2CS and its officers, agents, employees, and subcontractors from and against any and all loss of property and/or personal injuries, not due to the negligence of Mark R Moss / M2CS, or its subcontractors, agents, servants or employees. It is expressly understood and agreed that under no circumstances will Mark R Moss /M2CS be responsible for the theft or other loss of Client's property not directly attributable to theft of loss by Mark R Moss / M2CS, its agents, servants or subcontractors.
- 4> Mark R Moss /M2CS shall not be liable for any damages sustained from the delay or non-performance due to events beyond the reasonable control of the parties included without limitation, acts of God, disaster, government regulation, terrorist actions, strikes or other labor disputes, weather, earthquakes, fires, floods, war, riots, civil disorder, failure of power or utilities, or government acts.

**Thank you for your business!**