

ACADEMY EXPO, 116 MARION ROAD, CINCINNATI, OH 45215

Phone (513) 772-1898 Fax (513) 322-4473

## **Original Sewing & Quilt Expo 2025**

### **ADDITIONAL EQUIPMENT ORDER FORM**

Sharonville Convention Center – October 16<sup>th</sup>–18<sup>th</sup>, 2025

**1.** Complete & fax to (513) 322-4473 or to Cindy's email: [critchie@academyexpo.com](mailto:critchie@academyexpo.com) by the DEADLINE for discounted prices. Academy will email or fax a contract & charge slip to confirm receipt of your order. After the deadline, the higher Standard prices apply, and the equipment is limited as indicated below.

**PRE SHOW DISCOUNT DEADLINE to ORDER is TUESDAY, October 7<sup>th</sup>, 2025**

**2.** Your booth space includes Pipe & Drape & an Exhibitor Sign. Use this form to *order additional equipment*.

**3.** Complete the following area if you want to rent any ADDITIONAL equipment:

<b>EQUIPMENT</b>	<b>Discounted PRICES</b>	<b>QTY</b>	<b>\$ TOTAL</b>	<b>After 10/7 Deadline PRICES</b>
6' x 30" Table, covered & skirted (show colors)	\$50.00	X		\$ 100.00
6' or 8' TALL Table (40") cover/skirt (show colors)	\$70.00	X		\$ 140.00
8'x30" Table, covered & skirted(show color)	\$60.00	X		\$ 120.00
30" Round TALL Table with White Linen	\$50.00	X		N/A
Any size, plain Table (Indicate size: )	\$45.00	X		\$ 90.00
Folding Chair	\$10.00	X		\$ 20.00
6' x 18" Table, covered & skirted (show colors)	\$50.00	X		N/A
Vendor Labor - PER Hour	\$50.00	X		

(Show color skirting is BLACK with a White Linen table cover.)

**4.** Complete payment information, Credit Card Only, All Credit Cards Accepted:

Name on Card \_\_\_\_\_  
Credit Card Type \_\_\_\_\_  
Card # \_\_\_\_\_  
Card Expiration Date \_\_\_\_\_  
CVV# \_\_\_\_\_  
Card Billing Zip \_\_\_\_\_

Subtotal \$ \_\_\_\_\_  
Tax (7.8%) \$ \_\_\_\_\_  
3.99% CC Fee \$ \_\_\_\_\_  
**Total Due** \$ \_\_\_\_\_

**5.** Complete information, sign & fax this form:

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Phone # \_\_\_\_\_  
Fax # \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Email \_\_\_\_\_  
**YOUR BOOTH#** \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## **MATERIAL HANDLING AND DRAYAGE INSTRUCTIONS & CHECKLIST**

\_\_\_\_\_ 1. You are responsible for contacting a carrier and scheduling your shipment to us. Shipments are NOT accepted at the show site, unless prescheduled with Academy. Drayage charges apply.

\_\_\_\_\_ 2. Clearly address each container to: **Academy Expo**  
**2025 Original Sewing & Quilt Expo**  
**"Your Name & Booth Number"**  
116 Marion Road, Cincinnati, OH 45215  
Phone (513) 772-1898 Fax (513) 322-4473

\_\_\_\_\_ 3. Payment must be made by credit card. All Credit cards accepted.

\_\_\_\_\_ 4. Total number of containers (#): \_\_\_\_\_

\_\_\_\_\_ 5. Rates: \$ 1.25 per pound  
(Minimum payment required \$50.00 for 1- 40 lbs.)  
Total weight of packages shipped to Academy (lbs.): \_\_\_\_\_  
7.8% Sales Tax \_\_\_\_\_  
3.99% Credit Card Convenience Fee \_\_\_\_\_  
Total amount due (\$): \_\_\_\_\_

\_\_\_\_\_ 6. Your Company Name: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
Company City / State / Zipcode: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Your Booth #: \_\_\_\_\_

**\_\_\_\_\_ 7. DEADLINE: All material must arrive on or before Tues., October 7th, 2025.**  
**Shipments received after the deadline will incur a \$125.00 late fee.**

\_\_\_\_\_ 8. Academy will store & deliver your container(s) to your booth at the meeting site.  
We are not responsible for any unpacking, repackaging, setup, or breakdown of materials.

\_\_\_\_\_ 9. \*\*\* Affix your carriers PREPAID shipping return labels & our "Return Drayage Form" to your returning packages, then CALL your carrier to schedule a pickup from our warehouse on either Tuesday, October 21<sup>st</sup> or Wednesday, October 22<sup>nd</sup>, 2025.

\_\_\_\_\_ 10. Fax this completed, signed form to # (513) 322-4473 with your credit card information:  
CREDIT CARD TYPE \_\_\_\_\_ CREDIT CARD EXP DATE \_\_\_\_\_  
CREDIT CARD # \_\_\_\_\_ CVV# \_\_\_\_\_  
NAME as it appears ON CARD \_\_\_\_\_  
BILLING ADDRESS \_\_\_\_\_  
BILLING STATE / ZIP \_\_\_\_\_

Person responsible for this information and its execution:

\_\_\_\_\_  
Name Title Date

Questions? Contact Cindy Ritchie by phone# 513-772-1898 or email: [critchie@academyexpo.com](mailto:critchie@academyexpo.com)

# RETURN DRAYAGE FORM

MY COMPANY NAME \_\_\_\_\_

MY BOOTH # \_\_\_\_\_

MY RETURN PACKAGES ARE SHIPPING TO:

COMPANY \_\_\_\_\_

ATTN: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

# of boxes returned \_\_\_\_\_

Approximate total weight \_\_\_\_\_

Name of Carrier \_\_\_\_\_

**PLEASE** attach your completed, **pre-paid shipping labels** to each of the packages you are returning with **this form** and **call your carrier to schedule** pickup from Academy Expo.

**\*\*\*\* Please be sure to complete this form and  
attach it, *with your pre-paid shipping labels*,  
to your boxes to ensure a prompt return.**

Questions? Contact Cindy Ritchie by phone# 513-772-1898 or email:  
[critchie@academyexpo.com](mailto:critchie@academyexpo.com)

Academy Expo, 116 Marion Road, Cincinnati, OH 45215  
PH# (513) 772-1898, FAX# (513) 322-4473