

Drayage order form  
Greene County Expo Center  
120 fairgrounds Rd.  
Xenia, OH. 45385  
937-372-8621 ext.12  
GCExpoCenter@gmail.com

**NO SHIPMENTS WILL BE ACCEPTED UNTIL AUGUST 14TH, 2024**

A. Shipping: please forward all shipments PREPAID. Collect shipments will be refused. Please mark all shipments with the following information and send to the following address:

Event name: Cycle Con 2024

Exhibitor Name: \_\_\_\_\_ Booth number if applicable: \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Delivery: Monday-Friday 9am-4pm Shipping address:

Greene County Expo Center

Assembly Hall  
120 fairgrounds rd.  
Xenia, OH. 45385  
Attn: Rodney Keadle

B. Terms:

**Send payments in advance with the Drayage Form to:**

**Greene County Expo Center**

**120 fairgrounds rd.**

**Xenia, OH. 45385**

We must receive this form and payment prior to delivering items to your exhibit or shipping out your items after the show.

**Shipping and Receiving Rates: \$0.56 per pound. 200 pound minimum.**

Penalties: any penalties incurred because of incorrect address, storage, or reconsignment, etc. will be the responsibility of the person signing.

Shipments: ALL shipments must have a bill of lading showing the number of pieces, weight, and description of merchandise. Copies of the bill of lading should be sent to the Expo Center address. All packages inbound or outbound must be boxed, packed, labeled and taped by the person signing.

Liability: The Greene County Expo Center assumes no responsibility for concealed damage to materials. All materials should be properly insured against fire, theft, and all hazards while in transit.

Payments must accompany order and must be made in full prior to the event. No exceptions. If paying by credit card you can fill out the attached payment form and return with this drayage order form and either post mailed or emailed back. Check payments can be post mailed to our office.

NO CASH PAYMENTS WILL BE ACCEPTED. Checks can be made payable to Greene County Expo Center.

Authority to handle. All terms and conditions stated herein are understood and accepted.

Name: \_\_\_\_\_

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

city/state/zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

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

Return shipping instructions:

Ship to: \_\_\_\_\_

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

city/state/zip: \_\_\_\_\_

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

**Payment form**

Total weight of package(s): \_\_\_\_\_ lbs

Number of packages being delivered: \_\_\_\_\_

Do you need an invoice?      Yes              No

Would you like a secure payment link sent to you?              Yes              No

Card Payment Form:

Card number: \_\_\_\_\_

Expiration date (mm/yy): \_\_\_\_\_ Zip: \_\_\_\_\_ CVC: \_\_\_\_\_

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

I, \_\_\_\_\_, authorize payment for the amount listed above for drayage.  
I understand that any penalties incurred are my responsibility to pay. Any penalties will be notified to me.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

**Booth amenities form**

Tables \$10/each, Linens \$10/each, chair covers \$1/each

**Number of 8 foot rectangle tables:** \_\_\_\_\_

**Number of 5 foot round tables:** \_\_\_\_\_

**Number of chairs:** \_\_\_\_\_

**Number of rectangle linens:** \_\_\_\_\_

**Number of round linens:** \_\_\_\_\_

**Number of chair covers:** \_\_\_\_\_