

# ELECTRONIC FOOT MASSAGERS AVAILABLE FOR RENT

**FOOT MASSAGE STATIONS**  
GREAT FOR SPONSORSHIPS  
REST STOPS



**EXHIBIT BOOTH RENTALS**  
*Great for your booth visitors and staff*

**Pick-up and Delivery Included**



*Therapeutic Massagers are engineered for Professional and Personal Healthcare!  
The advantage of the Therapeutic Massager is it may be used with shoes on or off.*

**EXHIBITOR AND STAFF LOUNGES**



**BENEFITS:**

- \* Improves Circulation*
- \* Relieved Aches and Pain*
- \* Aids in Preventing Cramps*
- \* Aids in Prevention of Swelling*

Email: [Info@OrlandoConventionMassage.com](mailto:Info@OrlandoConventionMassage.com)  
Phone: (407) 226-1288 \* Fax: (407) 226-1299 \* Text: (407) 342-2377  
[www.OrlandoConventionMassage.com](http://www.OrlandoConventionMassage.com)

Stroll down to page 2 to order/reserve one or more foot massagers for your exhibit booth or hospitality suite.  
Stroll down to page 3 to see the cost for a 3-day Foot Massage Station/Booth with multiple foot massagers for your event or sponsorships.

# FOOT MASSAGER RENTAL REQUEST FORM



**Company**

**Contact Name**

**Billing Address**

**City**

**State**

**Zip Code**

**Country**

**Phone Number**

**Fax Number**

**Email Address**

**Trade Show Name**

**Booth or Room Number**

**Hall**

**On-Site Contact Name(s)**

**On-Site Contact Mobile Number(s)**

**Start Date**

**End Date**

**Start/Drop Off/Pick-Up Time**



**Single Unit Rental Rate**

One Day Rental - \$100  
Two Day Rental - \$175  
Three Day Rental - \$225

**Number of Units**

**UNIT(S) COST**

**Service Charges (20%)**

**TOTAL RENTAL COST**

Serial Number or MFG's Date	Received Confirmation	Returned Confirmation

**CREDIT CARD AUTHORIZATION**

**CHECK ONE:**  FOR PAYMENT  HOLD FOR CHECK (10 Business Days)

**Card Type:**  Visa  MC  Amex  Discover

**Print Name of Card Holder**

**Signature of Card Holder**

**Credit Card Number** \_\_\_\_\_

**Expiration Date** \_\_\_\_\_ **Security Code** \_\_\_\_\_

3-Digit Number – Back of Card  
4-Digit on Front AMEX

**Billing Zip Code** \_\_\_\_\_

**RENTAL TERMS AND CONDITIONS BELOW - PLEASE READ BEFORE SIGNING**

- The RENTER shall be fully responsible for the rented equipment and the use of the rented equipment during the terms of the rental, normal wear and tear excepted.
- The RENTER shall pay CCMS full compensation for replacement of any equipment which is not returned because it is lost or stolen. RENTER shall pay no more than Fair Market Value for replacement, plus any taxes and shipping and possible loss of rental revenue, not to exceed a total of \$1,000 per unit and proof of loss must be provided to RENTER. CCMS's will invoice RENTER for replacement and shall be conclusive as to the amount RENTER shall pay under this paragraph.
- The RENTER shall not remove the equipment from the OCCC or the location shown herein as the place of use of the equipment without prior written approval of the CCMS.
- The equipment shall be delivered to RENTER and returned to CCMS at the RENTER's risk, cost and expense if not picked up by CCMS and receive signed receipt of return.
- Rental charges are billed to the RENTER for the full term even if the equipment is returned before the end of the term. No allowance will be made for any rented equipment or portion thereof which is claimed not to have been used.
- If the equipment is not returned during or at the end of the term, then the rental charges shall continue on a full term basis for any additional term or portion thereof until the equipment is returned.
- CCMS makes no warranty of any kind regarding the rented equipment, except that CCMS shall replace the equipment with identical or similar equipment if the equipment fails to operate in accordance with the manufacturer's specifications and operation instructions. Such replacement shall be made as soon as practicable after RENTER returns or inform CCMS of the non-conforming equipment.
- RENTER indemnifies and holds CCMS harmless for all injuries or damage of any kind while in RENTER's possession and for all consequential and special damages for any claimed breach of warranty.
- The RENTER shall pay all reasonable attorney and other fees, the expenses and costs incurred by CCMS in protecting its rights under this rental agreement and for any action taken by CCMS to collect any amounts due the CCMS under this rental agreement.
- These terms are accepted by the RENTER upon delivery of the terms to the RENTER or the agent or other representative of RENTER.

**Accept** \_\_\_\_\_

**Cosby's Corporate Massage Services**  
Office: 407.226.1288 ~ Text: 407.3422377 ~ Fax: 407.226.1299  
www.OrlandoConventionMassage.com  
Info@orlandoconventionmassage.com

# 3-DAY FOOT MASSAGER STATION REQUEST FORM



**Company**

**Contact Name**

**Billing Address**

**City**

**State**

**Zip Code**

**Country**

**Phone Number**

**Fax Number**

**Email Address**

**Trade Show Name**

**Booth Location(s)**

**Hall**

**On-Site Contact Name(s)**

**On-Site Contact Mobile Number(s)**

**Start Date**

**End Date**

**Booth Operation Hours** (Enter open and closing times for each day.)




**Choose Number of Massagers**

- Four Massagers @\$750   
  Six Massagers@ \$900   
  Eight Massagers@ \$1200   
  Ten Massagers @\$1500  
 Twelve\* Massagers @\$1700   
  Sixteen\* Massagers @\$2200

\*May be split into two locations    **Number of Locations**

**Massagers Cost**

**Number of Greeters**     **Number of Greeter Hrs**

**Hourly Rate**

**Greeter Cost**

**Enter Comments/Requests/Instructions Below**

**Service Charges 20%**

**Total Cost**

**CREDIT CARD AUTHORIZATION**

**CHECK ONE:**  **FOR PAYMENT**     **HOLD FOR CHECK** (10 Business Days)

**Card Type:**     **Visa**     **MC**     **Amex**     **Discover**

**Print Name of Card Holder**

**Signature of Card Holder**

**Credit Card Number**

**Expiration Date**

**Security Code**

3-Digit on Back of Card  
AMEX 4-Digit on Front

**Billing Zip Code**

1. Massage contract will be emailed to you confirming your order, signed contracts and full payment must be received in our office prior event start date. No service will commence without full payment prior to event.
2. Possible rate increase if orders aren't received 21 days prior to event start.
3. Service charges are added to final invoice. Service charges at OCCC are 20%; Central FL Hotels 24%; 28% at all other venues.
4. Any time extensions during the event must be guaranteed by a major credit card, the balance of charges will be invoiced and due within 14 days from last day of services rendered.
5. CCMS shall deliver the equipment to the RENTER or designated location(s) provided by RENTER and setup at RENTER's request.
6. Unless agreement calls for CCMS to provide a Greeter to manage Foot Massager Station for RENTER. RENTER indemnifies and holds CCMS harmless for any injuries or damage while in RENTER's possession and pay CCMS for replacement of any equipment which is lost or stolen.
7. CCMS makes no warranty of any kind regarding the rented equipment, except that CCMS shall replace the equipment with identical or similar equipment if the equipment fails to operate in accordance with the manufacturer's specifications and operation instructions. Such replacement shall be made as soon as practicable after learning of the non-conforming equipment
8. Each Electronic Foot Massager Station come with disinfecting wipes, a non-skid mat for each foot massager, and power strips.
9. CCMS provided Greeters shall manage all aspects of running the Foot Massager Station includes, opening, closing, show attendees how to operate massagers and manage flow of attendees.

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