

TELECOM REQUEST FORM

DATE

DATE:					
ORDERED BY:					
Event Name:					
Event Date(s):					
Company Name:					
Contact Name:					
Billing Address:					
Phone					
Fax					
Convention Services / Catering Manage	er				
Convention services/ Catering Manage	:1				
Service Options & Charges:					
Analogue Lines: Phone, Fax, Credit Card Machines, DID Lines (calls go directly to location, bypassing hotel operator)					
1-Time Installation Fee	\$125.00 per line				
800 Calls	Complimentary				
Local Calls Long Distance Calls	Charged at Hotel Rates Charged at Hotel Rates				
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Polycom Speaker Phone (Includes Ph \$250.00 per day	one Line):				
Voice Mail: Can be added to DID Line 1 Time Installation Fee	s; requires (7) days notice. \$100				
T-1 (Hard Wired):					
First Computer	\$300 per day				
Additional Computer	\$100 per day				
Wi-Fi:					
1-15 Computers per meeting room Total Price:	\$300 per day				



Order:	C	E 1D / /E:	T			
-	Start Date/Time	End Date/Time	Location	Type Line		
LINE 1						
LINE 2						
LINE 3						
LINE 4						
				<u> </u>		
METHOD OF PAYMENT: Bill to Master Account Bill to Credit Card						
Credit Card#	l#Exp.Date:					
Card Type: _		Name on Card:				
PLEASE RETURN TO THE ATTENTION OF YOUR CS/CATERING MANAGER VIA FAX 671.457.7456						

Rev. 5/11

50 Park Plaza at Arlington Street | Boston, MA 02116-3912 Tel: 617.426.2000 | bostonparkplaza.com Reservations Fax: 617.423.1708 | Hotel Guest Fax: 617.426.5545