

FORMS

THE VENETIAN® THE PALAZZO® SANDS EXPO®

3355 LAS VEGAS BOULEVARD SOUTH LAS VEGAS, NEVADA 89109

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SECURITY EVENT ORDER SHEET

THE VENETIAN AND THE PALAZZO LAS VEGAS
3355 LAS VEGAS BOULEVARD SOUTH, LAS VEGAS, NEVADA 89109
877.226.8319 702.414.2305

Group Name: _____ Event Name: _____ Event Date: _____

Contact Name: _____ Address: _____

Phone: _____ Fax: _____ Billing: _____

Conference Manager: _____ Security Coordinator: _____

Start Time: _____ End Time: _____ Location: _____ Service _____ # of Officers: _____

FEES FOR SECURITY:

Orders received more than five days prior to function - \$41.30 per hour per Security Officer.

Orders received less than five days prior to function - \$50 per hour per Security Officer. Per hour price is based on a 4 hour minimum.

COMMENTS: _____

The organization agrees to indemnify, defend, and hold harmless Venetian Casino Resort, LLC, its parent, subsidiaries, affiliated companies, and their respective and future officers, directors, employees, agents, and assigns ("Resort") from and against any and all claims, damages, liability, losses, judgements, liens, costs, and expenses (including all reasonable attorney's fees) arising out of, or alleged to have arisen out of, the utilization by organization of any security officer or staff member hired by or furnished by the Resort.

The Customer's duty to indemnify, defend, and hold harmless, as provided above, will apply even if the loss arises out of or in connection with, or is alleged to have arisen out of or in connection with, any negligent act or omission of the Resort. Customer further agrees that the Resort is not liable for any property damage including loss by theft or any other reason or any consequential damages arising out of property damage to any personal property brought onto the premises of the Resort. Customer further agrees to advise all participants that the Resort is not liable for any property damage including loss by theft or any other reason or any consequential damages arising out of property damage to any personal property brought onto the premises of the Resort.

Client Signature: _____ Date: _____

VP of Security Approval: _____ Date: _____

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THE VENETIAN FIRE WATCH FOR WATER-BASED HAZING

EVENT ORDER SHEET

Client or Group Name: _____ Event Date: _____ Contact Name: _____
Contact Person: _____ Phone: _____ Fax: _____
Conference Manager: _____ Location: _____ Billing: _____

FIRE WATCH FOR HAZING FEES:

Winter Hazing (October – March): The Venetian Ballroom & Hall A-D: \$200 per hour with a four- (4) hour minimum per hazing period. Any other locations are \$350 an hour with a four (4) hour minimum per hazing period.

Summer Hazing (April – September): The Venetian Ballroom & Hall A-D: \$300 per hour with a four- (4) hour minimum per hazing period. Any other locations are \$475 an hour with a four (4) hour minimum per hazing period.

Hazing is not available in Hall G or Level 1 meeting rooms.

This charge includes the presence of a security officer in the room for the purpose of Fire Watch and the monitoring of haze levels.

FIRE WATCH FOR HAZING REQUIREMENTS & PROCEDURES:

“The Venetian and The Palazzo” allows use of water-based hazers only. Oil-based hazers are not allowed at any time. If found using oil-based hazers, hazing will be immediately shut down, all scheduled hazing charges will be applied, and you will be charged for any resulting life safety systems repairs. _____ Initial

“The Venetian and The Palazzo” requires that a haze demonstration be scheduled at least 24 hours in advance of the first scheduled hazing event. At this time, “The Venetian and The Palazzo” will verify that the equipment and haze levels meet “The Venetian and The Palazzo’s” requirements. There will be no charge for this demonstration.

The hazing fees will be listed as Fire Watch on your account, and you will be charged for actual hazing hours. A four (4) hour minimum for each hazing period/rehearsal is required.

Any hazing request received with less than 48 hours notice will be automatically charged an additional fee of \$175 per hour. _____ Initial

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THE VENETIAN FIRE WATCH FOR WATER-BASED HAZING

EVENT ORDER SHEET

HAZING DEMONSTRATION - DATE/TIME/LOCATION:

At least 24 hours in advance of the first scheduled hazing event, no charge.

Start Date and Time: _____ 1. _____ 2. _____ 3. _____

End Date and Time: _____ 1. _____ 2. _____ 3. _____

Start Date and Time: _____ 1. _____ 2. _____ 3. _____

End Date and Time: _____ 1. _____ 2. _____ 3. _____

Start Date and Time: _____ 1. _____ 2. _____ 3. _____

End Date and Time: _____ 1. _____ 2. _____ 3. _____

"The Venetian & The Palazzo" is not in control of hazing equipment and will not guarantee that the Fire Alarm will not activate if levels differ from test levels. If the life safety system is activated due to hazing and Resort incurs any financial liability due to disruption of other groups located in the congress center, resort will bill client for all such charges incurred.

The Client agrees to indemnify, defend, and hold harmless, Venetian Casino Resort, LLC, its parent, subsidiaries, affiliated companies and their respective and future offices, directors, employees, agents and assigns ("Resort") from and against any and all claims, damages, liability, losses, judgements, liens, cost and expenses (including all reasonable attorney's fees) arising out of, or alleged to have arisen out of, the utilization by Client of any security officer or staff member hired by or furnished by the Resort. The Client's duty to indemnify, defend, and hold harmless, as provided above, will apply even if the loss arises out of or in connection with, or is alleged to have arisen out of or in connection with, any negligent act or omission of the Resort.

The Client further agrees that the Resort is not liable for any property damage including loss by theft or any other reason or any consequential damages arising out of property damage to any personal property brought onto the premises of the Resort. The Client further agrees to advise all participants that the Resort is not liable for any property damage including loss by theft or any other reason or any consequential damage to any personal property brought onto the premises of the Resort.

Client Signature: _____ Date: _____

Facilities Approval: _____ Date: _____

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EXHIBITOR FOOD & BEVERAGE SAMPLE REQUEST FORM

Booth Number: _____ Company Name: _____ Address: _____

Contact Person: _____ Phone: _____ Fax: _____

Description of Sample Product: _____

Portion Size: _____ Method of Dispensing Product: _____

Additional fees may be incurred based on type of sample and service needed. Please forward all requests via fax to 702.414.2305.

INTERNAL USE

Approved: [] yes [] no

DISPENSING OF F&B PRODUCT SAMPLES:

1. Items dispensed are limited to products manufactured, processed, or distributed by the exhibiting company.
2. Exceptions are cappuccino machines, espresso, coffee, and soft drink dispensers, or logo bottled water. Quantities are limited to "sample" sizes - discuss with your Catering Conference Manager.
3. Food and beverage items used as traffic promoters (i.e., popcorn, coffee, bar service, ice cream) must be purchased from "The Venetian & The Palazzo".
4. All alcoholic beverages must be purchased from "The Venetian & The Palazzo" and dispensed by "The Venetian & The Palazzo" bartenders (prevailing rates will apply).
5. Sample sizes are limited to (1) ounce for food items and two (2) ounces for non-alcoholic beverage items.
6. Product liability insurance is required when sample food is distributed at "The Venetian & The Palazzo". "The Venetian & The Palazzo" will institute a charge for any rental equipment, storage of items, or cleaning of equipment associated with the distribution of samples.
7. When preparing food for distribution in the booth, the exhibitor must have an Itinerant Health Permit (contact Southern Nevada Health District at 702.759.1258

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ANIMAL SPECIAL PERMIT

_____ (Exhibitor) agrees to defend, indemnify, and hold "The Venetian & The Palazzo" its parent, subsidiary, and affiliated companies and their respective officers, directors, employees, and agents and assigns free, clear, and harmless from any and all claims, demands, losses, liability, judgments, liens, costs, and expenses (including reasonable attorney fees) arising out of or in connection with The Venetian Resort-Hotel-Casino's agreement to allow (Organization) to bring and/or display an animal on "The Venetian & The Palazzo" property. Please note "The Venetian & The Palazzo" reserves the right to require additional coverage as it sees fit. Additional coverage needs will be dictated by the Resort's Legal and Risk Management departments at their sole discretion.

WAIVER

"The Venetian & The Palazzo" does not assume any liability for loss of or damage to the animal(s) or any other personal property of _____ (Exhibitor) while on the property or in possession of "The Venetian & The Palazzo".

"The Venetian & The Palazzo" shall not be liable for, and _____ (Exhibitor) agrees to waive any and all claims for damage, including but not limited to consequential damages to the animal(s) and any of its personal property while on the property of or in the care, custody, or control of "The Venetian & The Palazzo".

Agreed to by: *Authorizing Signature:* _____ *Date:* _____
Name Printed: _____ *Title:* _____

GROUP BUSINESS CREDIT CARD AUTHORIZATION FORM

You are requesting The Venetian®, The Palazzo®, and/or Sands Expo® to charge your credit card for services required for the event or convention charges listed below. Please ensure this form is filled out completely and signed by the authorized card holder.

THE VENETIAN, THE PALAZZO, AND/OR SANDS EXPO CONTACT INFORMATION

(For Internal Completion)

Name and Title: _____

Phone: _____

Facisimle: _____

Email: _____

Group Event ID: _____

EVENT/CONVENTION INFORMATION

Group Name: _____

Event Name: _____

Arrival Date: _____

Departure Date: _____

Group Contact Name: _____

Group Contact Phone: _____

Group Contact Email: _____

CREDIT CARD INFORMATION

Amount to be charged: \$ _____

If authorizing this credit card to be used for all event or convention related charges, please initial here: _____

CREDIT CARD INFORMATION CONT.

I authorize any and all charges not covered by my advance deposit and, or other deposits to be charged to this credit card. The Venetian, The Palazzo, and/or Sands Expo terms are 100% prepay. If the above amount is not 100% prepayment, The Venetian, The Palazzo, and/or Sands Expo is authorized to charge the remaining amount. No additional signature will be required.

Credit Card Number:

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Expiration Date (Month/Year): _____

To safeguard information, our team will contact you by phone to obtain additional information needed to process your payment.

CARDHOLDER INFORMATION AS IT APPEARS ON YOUR ACCOUNT

Last Name: _____ First Name: _____ MI: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Facsimile: _____

Email: _____

I authorize The Venetian Resort, Hotel & Casino and/or the Sands Expo and Convention Cetner to charge this credit card as indicated above.

Cardholder Signature: _____ Date: _____

To prevent unauthorized access or disclosure, we have implemented procedures to safeguard and secure the information we receive. However, we are not able to verify the security of such information during electronic transmission to us. Therefore, this form is required to be faxed to your contact listed above at The Venetian, The Palazzo, and/or Sands Expo.

MEETING ROOM KEY REQUEST FORM (PAGE 1 OF 2)

Group Name: _____

EBMS ID: _____

Contact Name: _____

Catering & Conference Manager: _____

Contact Cell Number: _____

SES Manager: _____

Contact E-mail Address: _____

To ensure your keys are ready on time, please submit this request at least (5) business days prior to the start date.
Requests submitted with less notice may incur a labor fee of \$5 per key.

Ballroom Name & Number(s)	Entry Door(s) Number(s)	Start Date & Time	End Date & Time	# of Keys Requested	May V I P I S Team Enter?*	Onsite Requests	# of Keys Returned

** If no, there will still be the exception of Security & Facilities, only in the case of an emergency.*

Lost / damaged / non-returned keys upon departure will be charged a fee of \$175 per key.

If a master key for multiple ballrooms is lost and needs to be cancelled, a \$200 labor fee is applicable per meeting space floor, with a maximum fee of \$1,500. By signing this form the client acknowledges that all key-related charges, including but not limited to potential lost / damaged / non-returned key(s), will be applied to their group's master account.

PLEASE BE AWARE: As spaces may have various unsecurable access points (e.g. adjoining air wall doors, etc.), items should not be left in any meeting space without contracted security.

Client Name: _____

Client Signature and Date: _____

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MEETING ROOM KEY REQUEST FORM (PAGE 2 OF 2)

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I, _____, hereby acknowledge receipt of all requested keys for my program (# of keys issued: ____). As part of this acknowledgement, I fully understand all terms and conditions for my key request. All keys must be returned to a Catering & Conference Manager or a Meeting Coordinator prior to departure in order to avoid lost / damaged / non-returned key charges.

I also understand that if additional keys are requested during the program dates, this request will be accommodated and all above policies and fees will apply.

The following individuals have authority to order keys during program dates: _____

Client Signature & Date: _____

FOR COORDINATOR INTERNAL USE ONLY:

Form Received, Date and by Whom: _____ Master Account for Billing: _____

Keys Made: _____ # Keys Issued: _____

Additional Keys Made: _____

Keys Returned: _____ # Keys Not Returned: _____

Damaged / Non-Returned BEO Created and Issued Date: _____