



Helgerson
With The Image Resources Group

2900 S. Hydraulic

Wichita, KS 67216

316-943-1851

EMAIL: info@henryhelgerson.com

BOOTH # _____

**Century II Convention Center
Wichita, KS**

FREIGHT HANDLING ORDER FORM & FORK LIFT RENTAL

THE HENRY HELGERSON COMPANY HAS BEEN SELECTED AS DRAYAGE CONTRACTOR FOR THIS SHOW

1. Mail, fax or email this form and your advance payment to the address or fax number noted above as soon as possible.
2. **SEE BELOW FOR WAREHOUSE AND DIRECT TO SHOW SITE SHIPPING ADDRESSES.**
3. **All shipments must be sent pre-paid. COLLECT SHIPMENTS WILL BE REFUSED!**
4. The rate of \$68.00 per 100 pounds includes storage up to 20 days and delivery to the show site.
5. Henry Helgerson Company will receive freight at:

ADVANCED SHIPPING WAREHOUSE ADDRESS:

To: (NAME OF EXHIBITOR & BOOTH NUMBER)

For: (NAME OF SHOW C/O HENRY HELGERSON CO)

2900 S. HYDRAULIC, WICHITA, KS 67216

ADVANCED FREIGHT TO WAREHOUSE MUST BE

RECEIVED NO LATER THAN: **FEBRUARY 20, 2026**

INBOUND SHIPPING INFO – PRIOR TO EXHIBIT: (CHECK ONE) _____ TO WAREHOUSE _____ TO SHOW SITE

SHIPPED VIA: _____ PRO # _____

DATE SHIPPED: _____ ESTIMATED DATE OF ARRIVAL: _____

FORK LIFT REQUIRED FOR LOADING/UNLOADING? YES: _____ NO: _____ ADD \$150.00 PER EACH UNLOAD/RELOAD

OF CRATES: _____ # OF DISPLAY CASES: _____ # OF CARTONS: _____ # OF SKIDS: _____

TOTAL # PIECES: _____ TOTAL WEIGHT: _____ X \$68.00/100 lbs. = _____ TOTAL COST

OUTBOUND SHIPPING INFO – AT CLOSE OF EXHIBIT

SHIP TO: _____ FREIGHT COMPANY: _____

ATTENTION: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

Surcharges may apply for multiple item shipments. Henry Helgerson Company cannot be held responsible for unattended or non-prearranged freight left on the show floor. **ALL FREIGHT CHARGES WILL BE PAID BY THE VENDOR.**

HENRY HELGERSON WILL NOT BE RESPONSIBLE FOR ANY FREIGHT CHARGES AND WILL NOT ACCEPT COD FREIGHT

Credit card fees will be applied to all invoices. If the invoice is paid with a check or an electronic bank transfer, the fee will be deducted from the invoice total.

NAME OF CARDHOLDER: _____ EXPIRATION DATE: _____ SECURITY CODE: _____

CARD NUMBER: _____ SUBTOTAL FREIGHT CHARGES: \$ _____

CARDHOLDER SIGNATURE: _____ 7.5% SALES TAX: \$ _____ TOTAL DUE: \$ _____

CARDHOLDER PHONE NUMBER: _____ CHECK ENCLOSED: \$ _____

PAYMENT IN FULL, INCLUDING APPLICABLE SALES TAX, MUST ACCOMPANY YOUR ORDER

NAME OF EVENT: **KS MUSIC EDUCATORS ASSOC CONF 2026** BOOTH: _____

COMPANY NAME: _____ EMAIL: _____

ORDERED BY: _____ PHONE: _____