



ORDER FORM DIRECT DELIVERY TO VENUE (whitout storage)

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Congress / Exhibition name					
Exhibitor name		Hall / Stand no.			
Contact person at the booth		Mobil no.			
REQUESTED COMPANY		<u>i </u>			
Full company name		Contact person			
Telefon no.		Mail			
SHIPMENT INBOUND SHIPMENT OUTBOUND					
Full truck load / 13,6 loading meter		Full truck load / 13,6 loading meter			
Half truck load / 7 loading meter		Half truck load / 7 loading meter			
Part shipment / other:		Part shipment / other:			
SERVICE INBOUND		SERVICE OUTBOUND			
Truck unloading and direct delivery to stand		Pick up from stand and <u>direct</u> truck loading			
Only TIMESLOT booking / no service needed		Only TIMESLOT booking / no service needed			
Following service needed:		Following service needed:			
DATE & TIME REQUEST INBOUND		DATE & TIME REQUEST OUTBOUND			
MOVE IN (date & time)		MOVE OUT (date & time)			
ADDITIONAL DETAILS		<u> </u>			
Empty storage needed a		ipprx. e	mpties:		cbm
Additional information / instructions					
INVOICE DETAILS					
ompany Name			VAT No. (only for EU Countries)		
Address	City		Zip Code	Counti	γ
TERMS OF PAYMENT	:		:		
I will manage the payment via Online Link – Credit Card Payment Link (you will receive the Link together with our invoice)					
I hereby authorize the use of the following credit card for payment					
CREDIT CARD DETAILS	Visa		Mastercard		American Express
Cardholder Name Ca			count Number		
Expiry Date		CVC			
Date	Printed Name		Signature	Э	
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