



ORDER FORM DIRECT DELIVERY TO VENUE (without storage)

Congress / Exhibition name	Venue	a coordige,				
Exhibitor name		Hall / Stand no.				
Contact person at the booth		Mobil no.				
REQUESTED COMPANY						
Full company name		Contact person				
Telefon no.		Mail				
LSHIPMENT INBOUND		SHIPM	MENT OUTBO	UND		
Full truck load / 13,6 loading	Full truck load / 13,6 loading meter					
Half truck load / 7 loading me	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 direct truck loading				
Only TIMESLOT booking / no service needed		Only TIMESLOT booking / no service needed				
Following service needed:	Following service needed:					
DATE & TIME REQUEST	DATE & TIME REQUEST OUTBOUND					
MOVE IN (date & time)		MOVE OUT (date & time)				
LADDITIONAL DETAILS						
Empty storage needed	apprx. e	mpties:			cbm	
Additional information / instructions			-			
INVOICE DETAILS						
Company Name		VAT No. (only for EU Countries)				
Address	City		Zip Code	Country		
TERMS OF PAYMENT	<u> </u>		<u> </u>	<u> </u>		
I will manage the payment via O	nline Link – Credit Card I	Payment Link	(you will receive the	he Link toge	ether with ou	r invoice)
I hereby authorize the use of the	following credit card for	payment				
CREDIT CARD DETAILS	Visa		Mastercard		America	n Express
Cardholder Name		count Number				
Expiry Date		CVC				
Date	Printed Name	•	Signature	9		