HOLIDAY WORLD SHOW 2017

SHELVING Pre-payment Order Form

THE DEADLINE FOR ORDER PAYMENT IS 14/12/16

Exhibitors who do not return this form will NOT have shelves fitted to their stand NO ORDERS WILL BE TAKEN ON SITE. THIS FORM MUST BE FILLED IN and returned with PAYMENT IN FULL (including 23% VAT) in order to prevent possible delays in the set up of your stand Send to: Tony O'Brien, Obrien Expo Services Ltd.,

The Coach House, 1 Warwick Terrace, Appian Way, Ranelagh, Dublin 6.

EXHIBITOR DETAILS STAND NUMBER			PLEASE COMPLETE IN BLOCK CAPITA							
Company Name			-							
Mr/Ms/Mrs First Name	е	Surnar	ne							
Job Title										
Invoice Address										
Country:	e:									
t:	f:	m:								
_	Draw on this grid the plan of		1	2	3	4	5	6	7	8
	your stand indicating the	1								
1000	position of the required shelves.	2								
	Please indicate whether Flat	3								
	Shelves (A) in Red or Sloping Shelves (B) in Blue.	4								
	Units are in metre sq. blocks.	5								
(A) FLAT SHELF		6								
		7								
		-								
1000		8								
		Cost per Metre		Quantity		Height from Ground			Total	
	(A) FLAT SHELVES	€32.00								
(B) ANGLED SHELF	(B) SLOPING SHELVES	€38.00								
N.B. It is important that you give			N.B. DEADLINE			Sub T	otal €	:		
the height from the ground to			FOR ALL ORDERS : 14/12/2016			VAT @	23%			
the base of the shelf.						TOTAL €				
	CREDIT CARD DE	TAILS								
Visa Mastercard	TOTAL €					C	cv			

Expiry Date Card No Cardholder **Signature Date**

Address

Name