

# Exhibition display form

## CONTACT DETAILS

Contact Name:

Position:

Organisation:

Address:

Phone:

Email:

## EXHIBITION PACKAGE

Exhibition Display Sites, \$1620 No. of Booths:

## AGREEMENT

Name:

Position:

Organisation:

Date:

Signature:

## PAYMENT DETAILS

A tax invoice will be sent upon confirmation of your booking.

I require a tax invoice to make payment.

I would like to pay by credit card.

Amount

(Please note credit card payments will incur a surcharge.)

VISA    Mastercard    American Express

Card Number:

Expiry:

CVV:

Cardholder's Name:

Signature: