





Phone +31 2511250060

Email: eau@fairexx.nl

| Exhibitor: | | | | Booth no. | | | | |
|--|---|-----------------|----------------------|----------------|---------|------------|------|--|
| CONTRACTOR CONTACT DI | ETAILS AND INVOICE | CE ADDRI | ESS | | | | | |
| Company name | | | | | | | | |
| Address | | | | | | | | |
| Postcode and city | | | | | | | | |
| Country | | | | | | | | |
| Phone | | | | E-mail | | | | |
| VAT nr. | | | | | | | | |
| PRE-EVENT INFORMATION | | | | | | | | |
| We will send the following | shipment meant fo | r / to the | warehou | use in the Net | therlan | ds | | |
| Number of packages | | Gross weight | | | | | | |
| Measurements in cm(s) (when needed add | | | | | | | | |
| attachment) | | | | Volum | ne | 1 | Cbm. | |
| Mode of transport | O Airfreight* | O Cour | Courier* O Seafreigl | | | ht* O Road | | |
| | * Please send copy airwaybill or seawaybill | | | | | | | |
| Date of arrival latest | | | | | | | | |
| Date delivery on stand | | | | | | | | |
| POST EVENT INFORMATIO | N | | | | | | | |
| Return transport | O Yes to origin | (| O other a | ddress | O No | 0 | | |
| To be arranged by | O Fairexx Logistics | | | | | | | |
| CREDITCARD DETAILS | | | | | | | | |
| Creditcard type | O Mastercard | 0 | Visa | | O Am | iex | | |
| Card number | | | | | | | | |
| Name cardholder | | | | | | | | |
| CVC /security code | | Expiration date | | | | | | |
| Signature principal Date and stamp | | | | | | | | |

Please send form by e-mail:

EAU@fairexx.nl