

# DELIVERY ADDRESS:

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**TO BE COLLECTED  
MONDAY BEFORE  
LUNCHTIME**

**VENUE CONTACT NUMBER TO GIVE TO FREIGHT COMPANY: 027 699 1915**

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**FREIGHT COMPANY:**

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**FREIGHT  
BOOKED? Y/N**

**FREIGHT COMPANY  
BOOKING REFERENCE:**

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**CONSIGNMENT COUNT:** \_\_\_\_\_ / \_\_\_\_\_ *e.g. 1/1 if only 1x Pallet or 1/2 then 2/2 if 2x Pallets*

**EXHIBITOR /**

**COMPANY NAME:** \_\_\_\_\_

**EXHIBITOR CONTACT NUMBER:** \_\_\_\_\_