





### Fill & Return

oc.wuf@adnec.ae



### **Best Price**

when you pay 15 days before the event date



### **Standard Price**

when you pay within 14 days or less from the event date



### **Deadline**

Submisions close 15 days prior to show, thereafter delivery cannot be guaranteed and standard price will apply.

**Tel** +971 (0) 2 406 3666 **P.O. Box** 5546 Abu Dhabi

| EXHIBITOR DETAILS:   |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
| Exhibiting Company Name:   |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| Date: Hall No Stand No   |  |  |  |  |  |  |  |  |  |
| * It is the exhibitor's responsibility to inform ADNEC Services of any changes to the stand number / service location. |  |  |  |  |  |  |  |  |  |
| ORDER CONTACT DETAILS:   |  |  |  |  |  |  |  |  |  |
| Full Name:   |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| Job Title:   |  |  |  |  |  |  |  |  |  |
| Company Name:  |  |  |  |  |  |  |  |  |  |
| Company Address:   |  |  |  |  |  |  |  |  |  |
| City:  |  |  |  |  |  |  |  |  |  |
| Postal Code:   |  |  |  |  |  |  |  |  |  |
| Country:   |  |  |  |  |  |  |  |  |  |
| Contact No.  |  |  |  |  |  |  |  |  |  |
| Email Address:   |  |  |  |  |  |  |  |  |  |
| On-site Contact Name:  |  |  |  |  |  |  |  |  |  |
| On-site Contact No.  |  |  |  |  |  |  |  |  |  |
| * It is important to review TERMS AND CONDITIONS attached on this order form before submitting your order.             |  |  |  |  |  |  |  |  |  |
| INVOICE BILLING DETAILS:   |  |  |  |  |  |  |  |  |  |
| Tax Registration No:   |  |  |  |  |  |  |  |  |  |
| Same As Above  |  |  |  |  |  |  |  |  |  |
| Preferred Invoice Currency USD AED   |  |  |  |  |  |  |  |  |  |
| Full Name:   |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| Job Title:   |  |  |  |  |  |  |  |  |  |
| Company Name:  |  |  |  |  |  |  |  |  |  |
| Company Address:   |  |  |  |  |  |  |  |  |  |
| City:  |  |  |  |  |  |  |  |  |  |
| Postal Codo  |  |  |  |  |  |  |  |  |  |

Country: \_\_\_\_\_\_\_

Contact No.

Email Address:





#### **PLEASE NOTE:**

- 1- Lights and sockets are located on the beams and poles.
- 2- Sockets provided on the shell scheme stands can only provide power up to 600watts. Anything above 600watts power will be chargeable.
- 3- The location of the distribution boards will be decided by ADNEC Services.

| Description  | Best Price | Standard Price | Quantity | Total Amount |
|--|------------|----------------|----------|--------------|
| 3-Pin Electrical Socket (British<br>Standard) single | 325.00     | 390.00         |          |              |
| 3-Pin Electrical Socket (British<br>Standard) double | 580.00     | 696.00         |          |              |
| Multi Pin Plug Adaptor                               | 30.00      | 36.00          |          |              |
| Spotlight on Track                                   | 290.00     | 348.00         |          |              |
| Arm Spotlight  | 325.00     | 390.00         |          |              |





### **ES 3-PIN ELECTRICAL SOCKET**

#### **MPA MULTI-PIN PLUG ADAPTOR**









Please complete the following grid plan to indicate the preferred location of your power / utility supply

#### **Hall Entrance**

Neighboring Stand Number

**Neighboring Stand Number** 

### PLEASE SPECIFY THE FOLLOWING:

| Position of the ordered utilities |  |
|-----------------------------------|--|
| Stand on left side                |  |
| Stand on right side               |  |
| Stand at rear                     |  |





**Signature** 

### **TERMS & CONDITIONS**

- 1. Prices are on rental basis for the duration of the event.
- 2. Invoice will be processed for all confirmed order within 3-5 working days.
- 3. Completed Grid Plan is required.
- 4. All orders must be paid 15 days before the event; standard price will apply for any unpaid orders 14 days before the event.
- 5. All orders received after deadline date will be subject to availability of the item and standard price will apply.
- 6. Items will not be supplied unless payment is received.
- 7. Any damage or loss will be under the responsibility of the exhibitor.
- 8. All prices, costs and charges are inclusive of 5% Value Added Tax.

### **CANCELLATION POLICY**

Name

1. Cancellation of confirmed orders are not permitted.

### ALL PAYMENTS MUST BE MADE PRIOR TO WORKS COMMENCING

Abu Dhabi National Exhibitions Company is (100%) Holding Company of ADNEC SERVICES LLC

Please complete and return the order form to the above email address. An invoice will be dispatched in return.

Orders will be Valid only with full remittance.

Date





### **CREDIT CARD AUTHORIZATION FORM**

To be returned by via e-mail to:

ADNEC Services LLC P.O.Box 5546, Abu Dhabi - UAE

Contact: Finance Department
Tel: + 971 02 4063653
Email: finance.as@adnec.ae

| I hereby g     |     |      |     |   |      |      |     |      |   |   | al p | err | niss | ion | for |   |   |   |
|----------------|-----|------|-----|---|------|------|-----|------|---|---|------|-----|------|-----|-----|---|---|---|
| Name /Referen  | ce: |      |     | I |      |      |     |      |   |   |      |     |      |     |     |   |   |   |
|                |     | 1    |     |   | <br> |      |     |      |   |   |      |     |      |     |     |   |   |   |
| Amount to be   | Cha | arg  | ed: |   |      |      |     |      | 1 |   |      |     |      |     |     |   |   |   |
| Type of Credit | Car | d:   |     |   | Vis  | a Ca | ard |      |   |   |      | Mas | ter  | Car | d   |   |   |   |
| My Credit Card | No  | . is | :∟  |   | <br> |      |     |      |   |   |      |     |      |     |     |   |   |   |
| Issue Date:    |     |      |     |   |      |      |     |      |   |   |      |     |      |     |     |   |   |   |
| Expiry Date:   |     |      |     |   |      |      |     |      |   |   |      |     |      |     |     |   |   | 1 |
| Signature:     |     |      |     |   |      |      | D   | ate: |   |   |      |     |      |     |     |   |   |   |
| Name of Credit |     |      |     |   |      | •    |     |      |   |   |      |     |      |     |     |   |   |   |
|                |     |      |     |   |      |      |     |      |   |   |      |     |      |     |     |   |   |   |
| Company nam    | e:  |      |     |   | <br> |      |     |      |   |   |      |     |      |     |     |   |   |   |
|                |     |      |     |   |      |      |     |      |   |   |      |     |      |     |     |   |   |   |
| Full Address:  |     | ı    |     |   | <br> |      |     |      |   |   |      |     |      |     |     |   |   |   |
|                |     |      |     |   | <br> |      |     |      |   |   |      |     |      |     |     | 1 |   |   |
| Tel/ Fax # :   |     | 1    |     |   |      |      |     |      |   |   |      |     |      |     |     |   |   |   |
| Email Address: |     |      |     |   |      |      |     |      |   |   |      |     |      |     |     |   |   |   |
|                |     | _    |     |   | <br> |      |     |      | 1 |   |      |     |      |     |     |   |   |   |
| Payment Detai  | ls: |      |     |   | <br> |      |     |      |   |   |      |     |      |     |     |   |   |   |
|                |     |      |     |   |      |      |     |      | 1 |   |      |     |      |     |     |   |   |   |
|                | ı   | ı    | ı   | 1 |      | ı    | 1   | 1    | ı | ı | ı    | 1   | 1    |     | 1   | ı | ı | 1 |