Acute Cardiac Care

STANDARD STAND ORDER FORM



Standard Stand Package Includes

Available for 6 to 18 sqm booths

- Octanorm modular system booth structure
- White suntalam panels
- 100W spot per 3 sqm
- Triple electricity socket
- Carpeting (Black / Gray / Dark Blue)
- 1 table (h=75cm, l=80cm, w=80cm)
- 2 chairs (h=80cm)
- 1 welcome desk
- (h=102cm, l=105cm, w=55cm)
- 1 A4 brochure rack (l=100cm, w=30cm)
- 1 waste basket (h= 50cm)
- Stand cleaning x2 times a day
- 1 kW Electricity connection and consumption
- White fascia board on all open sides.

Standard Stand Packag	ge sqm fee	EUR 65,00		
We would like	to order standard stand fo	or sqn	א EUR 65,00	= EUR
				VAT(18%)
				TOTAL
We would like to	o order a special design stand, p	blease contact us fo	or details.	
Fascia letter color:	Dark Blue Blac	k		
Name on fascia (will be	e printed as written below, max	imum 30 letters, Af	RIAL font)	
VAT (18%) will be adde	ed to all mentioned prices.			
We hereby confirm ab	ove orders for standard stand.			
For orders received	after September 1st or onsi	te, 50% surcharg	e will be applied	d.
Company Name	:	Booth #	:	_
Contact Person	:	Date	:	
Contact e-mail	:	Signature	:	

Please fill in and return this form to:



Official Supplier for ACC2012 – K2 Conference and Events Management Contact: Evren Turan (Mr.) Tel: +90 216 4289551 (ext. 131) Fax: +90 216 4289591 E-mail: acc2012@k2-events.com

Acute www.escardio.org	Cardiac Ca TURKEY 20-22 October 20			
	CREDIT CARD PAYMENT	ORM		
Company Name	·	. Booth #		
Contact Person	:			
Contact Person e-mail	:			
Credit Card Holder's Name	:			
Address	:			
Postal Code	:City:			
Country	:			
Tel	:	Fax :		
Card number				
CVV2 Code	:			
VISA	MASTERCARD	Expiry Date: / / / //////////////////////////////		
Total Amount to be charged	:EUR			
Cancellation Policy		Invoicing Information (if diffrent from above)		
All orders are final. There will not be any refunds for cancelled orders.				
Onsite Orders				
Forms will be available onsite for onsite orders. Onsite order will be available if ordered for the next day.				
I accept above cancellation policy and I authorize the payment of the total amount indicated above to be debited from the credit card indicated above by K2 Conference and Events Management.				

Date:....

Signature:....

Please note that you will see the charge as "KAIKI KONGRE YON. VE TUR" in your credit card receipt.

Please fill in and return this form to:

