

Form 29 CAPITAL SUITE BOOKING FORM

EXHIBITOR DETAILS				
Company Name:				
Contact Name			Job Title	
Company Address			TRN Number:	
City	Postal Code		Country	
Direct No.	Mobile No.			
Email Address				
Onsite Contact Name		On-site Contact	t Number (Mobile No.)	

RETURN DETAILS				
APPLICATION DEADLINE IMMIDEATLY				
Attn.	Reed Exhibitions FX LLC			
Email:	customerservice.wfes@rxglobal.com			
Print	Submit			

	Per Day	Per Day
Capital Suite Booking rate	**Build-Up Days	*Open Days

- * Open days covers the open hours of the exhibition from 10:00 17:00 (Monday 17/01/2022 till Wednesday 19/01/2022)
- ** "Build-up days" rate will be applied to bookings that require special build requirements, such as backdrops, projection screens, etc. and will require an additional day for contractors to access the capital suite, the rate depends on the Capital Suite booked as well as the work that needs to be carried on.

CS Layout Options (Select 1 or more):

Room Style	Furniture included in the package
Theatre	1 head table with 2 chairs, 50 chairs (with Basic AV only for full day rentals)
Classroom	1 head table with 2 chairs, 16 tables, 50 chairs (with Basic AV only for full day rentals)
Cabaret/ Round Table	1 head table with 2 chairs, 4 tables, 50 chairs with Basic AV only for full day rentals
Boardroom/ Meeting Room	6 Tables forming a meeting table with 12 basic chairs
U-Shape	Tables forming a U-shape with 12 basic chairs
Conference Style	Theatre or classroom setup with stage & backdrop for presenters
Other (please mention details or insert the desired layout)	

Event Details			
Event Name (to be included on lollipop directional signage)			
Capital Suite No.(s)			
Date	From:	To:	
Time	From:	To:	
Type of Audience:			
No. of attendees:			

- Please continue to page 2 for the booking details:



Form 29 CAPITAL SUITE BOOKING FORM

Booking Details:

	Description	Rate	QTY	Unit	Total
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Total
VAT 5%
Grand Total

GRAND TOTAL IN WORDS:		

For any additional requirements, please email customerservice.wfes@rxglobal.com

Payment Details

- Please complete this Form and submit to customerservice.wfes@rxglobal.com. An invoice will be dispatched in return.
- Orders will be considered valid only once full payment has been received. If payment has been made prior to invoicing, please send a copy of proof of payment to customerservice.wfes@rxqlobal.com.
- Payment can be made by Bank Transfer, or company cheque.
- PAYMENT METHOD:
 - o BANK TRANSFER

Payment net of bank charges, should be made in favor of Reed Exhibitions FZ LLC to the following account. Please allow 5 working days to ensure that the funds have cleared on time. Note that bank charges should be borne by the client.

Beneficiary name: Reed Exhibitions FZ LLC
 Bank name & address: CITI BANK N.A, Abu Dhabi,UAE
 SWIFT Code: CITIAEAD

- IBAN AE13021 1000 0001 0043 1025

COMPANY CHEQUE

This mode of payment is only applicable to companies based in UAE. Please allow 5 working days to ensure that the funds have cleared on time, and as such postdated cheques are not accepted. Please send a copy of the cheque or transmission slip for cheques deposited a day or on the day of the

event. Cheque should be made payable to: Reed Exhibitions FZ LLC

Reed Exhibitions FZ LLC TRN (Tax Registration Number): 100233615200003



Form 29 CAPITAL SUITE BOOKING FORM

Terms and Conditions

- Confirmed booking requires duly completed and signed rental form and 100% payment of the contracted amount
- Cancellation by the client for any reason after confirmation will be charged at 100% of the contracted amount.
- Any sum paid towards the Capital Suite rental shall be retained by the organizer in the event of cancellation by any reason.
- This agreement you are entering into a legally binding contract
- Any issues should be reported directly to Reed Exhibitions' responsible person that is managing the capital Suites or by emailing <u>customerservice.wfes@rxglobal.com</u>
- Service delivery will begin at least 24 Hours before the start of the event, provided, that the payment has been settled in full and there is no other event happening in the same booked Capital Suite
- Orders placed onsite once build-up has commenced are subject to availability and Service delivery are not guaranteed
- Please read the below carefully in regards to the AV rental:
 - The client accepts full responsibility for the AV equipment and associated cabling as provided and is therefore liable for any damage or loss caused due to customer negligence. This does not apply to equipment deemed to have failed due to normal wear and tear or the failure of consumable components such as lamps, batteries etc.
 - The client accepts that under no circumstances will they, interfere with, attempt to repair or open any of the AV equipment in the event of a technical failure. All technical issues should be communicated to our AV Technician immediately.
 - The client accepts that Reed Exhibitions FZ LLC shall have no liability to the customer for any consequential losses due to the failure of any AV equipment as supplied.

We hereby declare that we have read and accepted the above mentioned Capital Suite Booking Agreement of which a copy has been retained in our files. We hereby agree to abide by the terms and conditions stated to this order form.

tamn			
camp			
	tamp	tamp	tamp