

FASCIA NAME FORM

To be filled and returned by E-mail to: milan@cityneon.com.bh
 Tel: +973-1759 0191 | Mobile: +973-3607 8009 | Fax: +973-1759 4716
 Cityneon Middle East W.L.L
 P.O. Box 2490, Manama, Kingdom of Bahrain
 Contact Person: Ms.Milan



Deadline: 15th October 2019

Form to be submitted before the deadline and delivery cannot be guaranteed for any late orders. This form also displays the furniture allocated with Walk-On packages.

EXHIBITING BOOTH INFORMATION			
Booth Name			Booth No.
BILLING DETAILS			
First Name			
Last Name		Job Title	
Company Name			
Billing Address			
City	Postal Code	Country	
Tel No.		Fax No.	
E-mail Address			

Terms & Conditions:

- Only company names with a maximum of 20 characters are included and no company logos are included. Logo printing will be at an additional cost. If you wish to have your logo on the fascia, please send a high-resolution graphic file in Adobe Illustrator or PDF.
- If exhibitor did not submit this fascia form before deadline, standard fascia name will be printed as per registered company name provided by the Organiser. Should there will be fascia name changes required after installation will be subject to an additional charge of USD25 for each set.
- Exhibitors are encouraged to engage Cityneon for all graphic services. Should you wish to engage your own external supplier, there will be a non-refundable one-time maintenance fees of USD30 per wall panel.
- With effect from 1st January 2019, Value Added Tax (VAT) shall be applicable as per the Government regulations in Bahrain. Our quotes and prices are exclusive of VAT, which would be added to the final invoice amount.

e. ALL PAYMENTS MUST BE MADE PRIOR TO COMMENCING WORK

Please complete and return the order form to the above email address with billing details and tax invoice will be dispatched in return. Services will not be rendered until FULL payment received and all bank charges are to be borne by remitter. Notice of any cancellation or amendment to paid orders must be given at least fourteen (14) days prior to event build up in order for reimbursements, failing which your payment will be forfeited.

Credit Card (Kindly fill up Credit Card Authorisation Form) Bank Transfer

If payment is made by telegraphic transfer, kindly email us a copy of the telegraphic transfer transaction slip. Bank transfer should be made in favour of – **CITYNEON MIDDLE EAST W.L.L.** with the following details:

BANKING DETAILS			
Bank Name	: Al Salam Bank B.S.C	IBAN No.	: BH32ALSA00205562100101
Bank Address	: P.O Box 18282, Manama, Bahrain	Correspondent Bank in New York	: JP Morgan Chase Bank, N.A New York
USD Account No.	: 205562100101	Al Salam Bank A/C No.with JP Morgan Chase	: 400758954
Swift Code	: ALSABHBM	Swift Code for Correspondent Bank	: CHASUS33

NAME ON FASCIA

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(Note: Please type in CAPITAL LETTERS and submit form in soft copy to ensure error-free reproduction on fascia.)

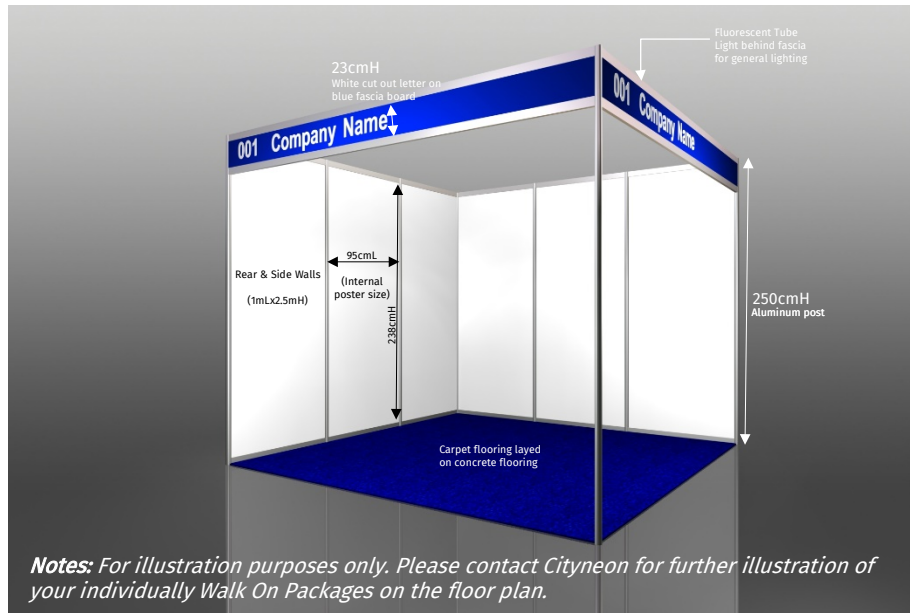
Signature: Company Stamp:
 Name: Date:

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Entitlement	9sqm	12sqm	15sqm	18sqm	21sqm	24sqm	27sqm	30sqm	36sqm
Fluorescent Tube Light	2	2	3	4	4	4	6	6	8
Waste Paper Basket	1	1	1	2	2	2	2	3	4

