BOOKING FORM OF,

QUEBEC, COMPLEXE CAPITALE HÉLICOPTÈRE JANUARY 14th TO 17th, 2021

| BUSINESS NAME : | | | |
|---|------------------------|----------------------|----------------------------------|
| ADRESS : | | | |
| CITY : PROV : ZIP : | | | |
| MANAGER : | | PH | ONE : |
| EMAIL : CEI | | LL PHONE: | |
| PRODUCT(S) /SERVICE(S) OFFERED : | | | |
| SPACE ONLY | | ALL INCLUDE (| SPACE AND COMPLETE BOOTH+CARPET) |
| QTY #SPACE | DIMENSION PRICE | QTY #SPACE | DIMENSION PRICE |
| | 8 X 10 \$ 1225.00 = | | 8 X 10 \$ 1700.00 = |
| | _ 10 X 10 \$ 1325.00 = | | 10 X 10 \$ 1800.00 = |
| co | ORNER \$ 150.00 = | | CORNER \$ 150.00 = |
| ELECT. 15 AMPS \$ 125.00 = ELECT.15 AMPS \$ 125.00 = | | | |
| Note : | | | |
| We agree to pay a deposit of 500\$ to confirm this reservation. I therefore autorize the National Outfitter Show to charge this amount on my credit card. | | | |
| MASTER | RCARDVISA | _ INCLUDE BANK CHECK | BANK CHECK COMING |
| # CARD : | | - | EXP: |
| OWNER : | | | |
| SIGNATURE : | | DATE : | |
| PLEASE, SEND THIS FORM BY : | | | |
| EMAIL: salonchassepeche@pourvoirie.net OR | | OR | FAX: 450-835-0067 |
| IF IT'S BANK CHECK: SALON NATIONAL DE LA POURVOIRIE | | | |
| SEND IT TO: | 300, RUE PRINCIPALE | | |
| : | SAINT-DIDACE, P. QUÉ | J0K 2G0 | |