Exhibitor Catering Order Form

LEITH'S
AT THE CENTRE

Event Name:
Room:
Stand Number:

Date	Time	Item	Quantity	Price (£)

Please complete & return this form by fax to your Account Manager on 020 7798 4266, or tel: 020 7798 4288.

Leith's must receive the completed form at least 2 weeks prior to the event.

On behalf of the above named organisation, I request the provision of a food and/or beverage service for the duration of the above event. I agree that a Leith's invoice shall be proof enough for the charge of the services provided. I also accept that such an invoice will be paid upon presentation by cheque or credit card, before leaving the Centre, unless otherwise arranged with a Leith's Banqueting Co-ordinator.

Print Name: _____

Signature: _____

Company Name: _____

Contact Tel: _____ Contact Fax: _____ Email: _____

Paying By (Please tick): Cheque ☐ Credit Card ☐

Cardholder Name: _____

Card Number: _____ Expiry Date: _____

N.B: FOOD & BEVERAGE CANNOT BE BROUGHT ONTO THE PREMISES WITHOUT PRIOR CONSENT FROM YOUR ACCOUNT MANAGER. FAILURE TO INFORM YOUR ACCOUNT MANAGER MAY INCUR AN ADDITIONAL CHARGE

Please note that all of the prices listed above are subject to VAT at the current rate and are from April 2008 to March 2009. You will be advised of any variations in availability or price should circumstances dictate.