

# Transportation Order Form

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<b>PICK UP INFORMATION</b>	PICK-UP DATE:	PICK-UP TIME:	MAIN INTERSECTION:	CONTACT NAME:
	PICK-UP COMPANY NAME & ADDRESS			
	EMAIL:			FAX:
	LOADING DOCK AT PICK-UP: <input type="checkbox"/> YES <input type="checkbox"/> NO	TRACTOR TRAILER CAN FIT: <input type="checkbox"/> YES <input type="checkbox"/> NO	BLANKETS/STRAPS: <input type="checkbox"/> YES <input type="checkbox"/> NO	
	# OF PIECES:	WEIGHT:	DIMENSIONS	
	SPECIAL INSTRUCTIONS			

<b>SHOW INFORMATION</b>	<b>Toronto Audio Video Entertainment Show (TAVES) LOCATION:</b> Sheraton Centre, Downtown Toronto <b>DATE:</b> Oct. 28 – Oct. 30, 2016			
	EXHIBITING COMPANY:	SHOW SITE CONTACT:	BOOTH #:	
	MOVE-IN DATE:	MOVE-IN TIME:	MOVE-OUT DATE:	MOVE-OUT TIME:

<b>DELIVERY AFTER SHOW (IF REQUIRED)</b>	DELIVERY DATE:	MAIN INTERSECTION:	CONTACT NAME:	
	SHIP TO NAME & ADDRESS:			
	EMAIL:	PHONE:	FAX:	
	LOADING DOCK DELIVERY: <input type="checkbox"/> YES <input type="checkbox"/> NO	TRACTOR TRAILER CAN FIT: <input type="checkbox"/> YES <input type="checkbox"/> NO	BLANKETS/STRAPS: <input type="checkbox"/> YES <input type="checkbox"/> NO	
	# OF PIECES:	WEIGHT:	DIMENSIONS:	
	SPECIAL INSTRUCTIONS:			

<b>PAYMENT INFORMATION</b>			
CHEQUE ENCLOSED - payable to Showtime Displays <input type="checkbox"/>		VISA <input type="checkbox"/>	
CREDIT CARD NO:		CARD EXPIRY DATE (MONTH/YEAR):	
AUTHORIZED SIGNATURE:		PRINT NAME:	
<b>PAYOR NAME AND ADDRESS</b>			
COMPANY:			P.O. ORDER #:
ADDRESS		CITY:	
PROV/STATE	POSTAL CODE:	PHONE:	FAX

Customer Signature:

Print name:

Title:

ALL CUSTOMERS WITHOUT AN ESTABLISHED ACCOUNT WITH SHOWTIME DISPLAYS MUST PREPAY BY CREDIT CARD OR CHEQUE