

Form own catering on stand

To process your request you need to fill in the information below. Send this form with the information to hospitality@jaarbeurs.nl and we shall if agreed, send a conformation.

Information applicant

Company name:

Booth number:

Adress:

Zip code + City:

Phone number:

Email address:

Contact (authorized to sign):

Date of the catering:

[Company name]

[Hall number]

[Booth number]

[Street name and number]

[Zip code]

[City]

[Phone number]

[Emailaddress]

[Name]

Description of catering

[Booth surface in m2]

[Description]

Other information

Only complete forms will be taken into treatment. We assume that you are familiar with the terms and conditions. As soon as we processed your request you will receive a confirmation.

Signature and company name:

By conformation by this form that you informed of this document and agrees to the HACCP conditions set.