



## SHELL SCHEME FASCIA NAME

Exhibitor's Name:									
Stand Number Contact Personal Tel:									
Signature:	_	Date:							
Please print (maximum 3 English		-		TERS. E	nglish alp	habet			
1	4								

Please rename file to NAME OF COMPANY\_FASCIA FORM 2024 and submit by: February 15, 2024

## **Terms and Conditions:**

- 1. The form must be submitted by the date specified above
- 2. The company name submitted will be printed/installed as according to the name indicated in the boxes
- 3. Any re-printing due to failure in submission will be charged at \$30 per company name/ per fascia board
- 4. All reprinting are subject to printing lead time and installation lead time