



Vienna, Austria

Euroanaesthesia 2019

The European Anaesthesiology Congress

1-3 June 2019

Meeting Room Order Form

Company Name		
Invoice address	Street	
	Number	
	Town	
	Post Code	Country
Tel - including country code		
Email address		
VAT number		
Contact Person	First Name	Last Name

Room allocation: Rooms will be allocated in order of application

Audiovisual material: Please note AV is not included in the room price. Please send your request along with this order form.

U-shape capacity	m ²	Price per day (€)*	Price per hour(€)*	Date	Timeslot	Total price (€)*
10	16	400	100			
18-20	32-54	800-2000	100-500			
30-32	48-96	1000-3400	200-850			
44	64	1600	400			

*exclusive VAT

MODIFICATIONS: An administrative fee of € 150 will be charged for each modification requested after invoice is issued.

IMPORTANT: By submitting this form, the exhibitor accepts the 2019 Guidelines and Terms & Conditions
Payment within 30 days of the invoice date. Cancellations will be not be refunded.

Authorised signature			Company stamp
Printed name			
Job title			
Date			

Please return this form to aude.quivy@esahq.org