

Artmedia

Account Setup Form

Please fill out all the fields and add any additional contacts that might assist us in servicing your account with us better. Please sign, date and either fax the form back to +44 20 7254 9205 or email contact@artmedialondon.com.

COMPANY NAME: _____

COMPANY REG. NUMBER: _____

VAT NUMBER: _____

MAIN CONTACT PERSON: _____

MAIN CONTACT ADDRESS: _____

MAIN CONTACT TELEPHONE: _____

MAIN CONTACT EMAIL: _____

BILLING CONTACT PERSON: _____

BILLING CONTACT ADDRESS: _____

BILLING CONTACT TELEPHONE: _____

I confirm I have read and accept the Terms and Conditions of Sale, Service and Hire that apply to all transactions, copies of which have been made available to me. I am authorised to commit my organisation to the Terms and Conditions. Please note terms of payment is strictly 30 days after invoice date.

Print Name: _____

Print Position: _____

Signature: _____

Date: _____