



think EVENTS. think SAMONNOY.

FORM – GE (A)
CORPORATE MEETINGS / CONFERENCES / ROAD SHOWS

[PLEASE FILL IN ALL THE DETAILS]

A. Client Details –

Title (Please Tick '✓'): MR [] MRS [] DR [] Others (Please Specify): _____

First Name: _____ Last Name: _____

Organization: _____ Designation: _____

Contact Number: _____ Email: _____

Contact Person: _____ Designation: _____

Mobile Number: _____ Email: _____

B. Office Correspondence Address:

Landmark: _____ Pin: _____

C. Products / Services of the Organization (Brief Intro):

D. Bouquet of Services Required (Please Tick '✓'): (Min 3 Services)

a. Venue Finalization []

b. Venue Décor []

c. AV Set Up at the venue []

d. Catering Services []

 i. Lunch No. of Pax – [] []

 ii. Dinner No. of Pax – [] []

 iii. Mock tails [] / Cocktails [] No. of Pax – [] []

e. Gifts / Freebies []

f. Hotel Accommodations for outstation guests []

g. Travel Arrangements []

h. Local Transport []

i. Photography / Videography []

E. Proposed Event Date: _____ / _____ / _____. (MM/DD/YYYY)

Date: _____ / _____ / _____ (MM/DD/YY) Place: _____

Full Signature (Client): _____ Office Seal (If Applicable): _____