



Please print, fill out, sign and fax to: (206) 236-6486

Shipping Instruction Form (SIF)

Company Name _____

Address _____

City, State, Zip _____

Contact: _____ Phone : _____ Fax : _____

The information completed below is a confirmed booking with AVG and is subject to all the terms set forth on the airbill. Cancellation of this booking with less than 72 hours notice, will result in a booking charge.

**** Customer Authorization for Booking: _____ ****

***** PICK-UP *****

***** DELIVERY *****

Pickup Date:

Delivery Date:

Pickup Time:

Delivery Time:

Company :

Company :

c/o :

c/o :

Address :

Address :

:

:

Contact :

Contact :

Phone :

Phone :

Show Name :

Show Name :

Show Dates :

Show Dates :

Booth Number :

Booth Number :

Drayage Company :

Drayage Company :

Breakdown Dates :

Setup Dates :

Breakdown Time :

Setup Time :

I&D company :

I&D company :

Show Contact :

Show Contact :

Cell Phone # :

Cell Phone # :

of Pieces: Total Weight:

Ins./Declared Value: \$

Dimensions L x W x H:

Special Instructions:

To schedule your shipment, sign above then fax completed SIF to

Fax #: (206) 236-6486 *** Phone #: (206) 236-6124**