

RIVINGTON BUSINESS CENTRE

BOOKING FORM

Rivington House, 82 Great Eastern Street, London, EC2A 3JF

Telephone: **020 7749 7200** Facsimile: **020 7739 8683** E-Mail: info@rivingtonhouse.co.uk

Company Name:
Address:
Director/Proprietor:
Nature of Business:
Telephone Number:

SERVICES	COST		COLLECT	PERIOD								
MAIL	<input style="width: 100%;" type="text"/>	MAIL FORWARD	<input type="checkbox"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Monthly</td> <td style="width: 20px;"></td> </tr> <tr> <td style="padding: 2px;">3 Months</td> <td></td> </tr> <tr> <td style="padding: 2px;">6 Months</td> <td></td> </tr> <tr> <td style="padding: 2px;">1 Year</td> <td></td> </tr> </table>	Monthly		3 Months		6 Months		1 Year	
Monthly												
3 Months												
6 Months												
1 Year												
TELEPHONE	<input style="width: 100%;" type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">DAILY</td> <td style="padding: 2px;">TWICE WEEKLY</td> <td style="padding: 2px;">WEEKLY</td> </tr> <tr> <td style="width: 33px;"></td> <td style="width: 33px;"></td> <td style="width: 33px;"></td> </tr> </table>	DAILY	TWICE WEEKLY	WEEKLY							
DAILY	TWICE WEEKLY	WEEKLY										
MAIL & TELEPHONE	<input style="width: 100%;" type="text"/>											
FAX	<input style="width: 100%;" type="text"/>	TELEPHONE	<input type="checkbox"/>									
MAIL, TEL & FAX	<input style="width: 100%;" type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Phone Through</td> <td style="padding: 2px;">Post Daily</td> <td style="padding: 2px;">Post With Letters</td> </tr> <tr> <td style="width: 33px;"></td> <td style="width: 33px;"></td> <td style="width: 33px;"></td> </tr> </table>			Phone Through	Post Daily	Post With Letters					
Phone Through	Post Daily	Post With Letters										
BUSINESS PACK	<input style="width: 100%;" type="text"/>		<input type="checkbox"/>									
CONNECTION CHARGE	<input style="width: 100%;" type="text"/>	FAX										
OTHER	<input style="width: 100%;" type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Phone Message</td> <td style="padding: 2px;">Post Daily</td> <td style="padding: 2px;">Fax Through</td> </tr> <tr> <td style="width: 33px;"></td> <td style="width: 33px;"></td> <td style="width: 33px;"></td> </tr> </table>			Phone Message	Post Daily	Fax Through					
Phone Message	Post Daily	Fax Through										
DEPOSIT	<input style="width: 100%;" type="text"/>											
TOTAL	<input style="width: 100%; border: 2px solid black;" type="text"/>											

FORWARDING INSTRUCTIONS _____
IF DIFFERENT FROM ABOVE _____

HOW DID YOU HEAR OF US? _____
ARE YOU REGISTERED FOR VAT? YES <input type="checkbox"/> NO <input type="checkbox"/>

SIGNATURE _____	DATE _____
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CHEQUES TO BE MADE PAYABLE TO *RIVINGTON SECRETARIAL SERVICES*