



**FLYER Distribution – Booking Form & Contract**

Business Name: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
Tel: (w) \_\_\_\_\_ Fax: \_\_\_\_\_  
Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

**Product:** Flyer Distribution Advertising  
**Date:** 28/29 April 2017  
**Fee (x):** N\$ 500-00 (28/04)  N\$ 1000-00 (29/04)   
**ONLY 5 clients per day allowed with a maximum of 1000 flyers.**

Advertising agreement entered into and between Outjo Wildsfees and the Business/Client indicated above. Flyer distribution will only be done on the day requested. Outjo Wildsfees will be responsible for the distribution. The onus lies upon the Business/Client to ensure that flyer materials as well as proof of payment reach Outjo Wildsfees two weeks prior to the Fair. Both parties have the right to terminate this contract should either party fail to comply with the terms as set out in this agreement.

I, \_\_\_\_\_ (Full Names) in my capacity as \_\_\_\_\_ hereby declare that I am duly authorized to sign this agreement on behalf of the Exhibitor/Client. I further declare that I fully understand the contents of this agreement. Thus done and signed at \_\_\_\_\_ on this the \_\_\_\_\_ day of \_\_\_\_\_ 2017.

\_\_\_\_\_  
**Full Names**  
On Behalf of Exhibitor/Client

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Witness 1**

\_\_\_\_\_  
**Full Names**  
On Behalf of Outjo Wildsfees

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Witness 1**

**Contact Details:**  
Cell: 081 127 4015  
Email: [kunadmin@iway.na](mailto:kunadmin@iway.na)  
Fax: 067-313401

**Bank Details:**  
Outjo Wildsfees - Bank Windhoek  
Acc.No. 8004430250 - Branch: 481-673  
Outjo Branch - Cheque Account  
Reference: Invoice No. / Exhibitor or Client Name