MEDICAL SQUARE
THE TRADE DIRECTORY

TRADE DIRECTORY OF MEDICAL SURGICAL & DIAGNOSTIC INDUSTRY

ADVERTISEMENT BOOKING FORM

Company Name _____

Contact Person _____ **Mobile No.** _____

Address _____

City _____ **Pin** _____ **State** _____

Tel: _____ **GST No.** | | | | | | | | | | | | | | | |

Email _____ **Website** _____

BOOKING DETAILS

PARTICULARS	QUANTITY	RATES/PER	AMOUNT
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[ ] 4 Page Folder			
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[ ] Strip			

TOTAL BOOKING	
GST @ 18 %	
GRAND TOTAL	
ADVANCE	
BALANCE	

ADVANCE

Cheque / D.D. No. _____

Dated: _____ Amount: _____

Drawn on _____

Branch _____

TERMS & CONDITIONS

The company shall not be liable for any loss or damage incurred by the client due to non-acceptance of a booking. Upon acceptance the advance shall be considered as part payment of the total amount & the balance payment amount shall become due 30 days prior to printing.

Advance Payments are non-refundable. If the client has not paid the final balance amount by the due date of demand or did not provide the advertisement materials before the deadline the company reserves the right to cancel the booking. Cancellation charges will be 50% of the total payment.

Company reserves the right to cancel the booking at any stage. All disputes are subject to the exclusive jurisdiction of competent courts and forums in NCR only.

BANK DETAILS FOR NEFT / BANK TRANSFER

A/C NAME: S D PROMO MEDIA PVT. LTD.
A/C NUMBER: 0609 2560 000 852
NEFT / IFSC CODE: HDFC0000609
BANK: HDFC BANK LTD.
BRANCH: MUKHERJEE NAGAR, DELHI

I / we accept the above terms & conditions

For S D Promo Media Pvt Ltd

Client Signature **Date** / /2021

Authorised Signatory

S D PROMO MEDIA PVT LTD

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Mobile: +91-8130998383 / 9312253338 Email: anurodh@sdpromomedia.com / arun@sdpromomedia.com