

ACTIVATION REQUEST

Customer Name:		Contact Person:		
WITS Customer Number:				
Email Address:	_			
	Activa	ntion Details		
Company Name:				
Campaign Name:				
Proposed Dates:				
Stand Size (TICK)	3m by 3m	6m by 6m	10m by 10m	12m by 12m
Preferred Location (TICK) Library Lawns	Sibanye Bridge	Science Stadium	Gavin Reily Greens
Overnight Security (Addit Electricity (Cords and Oth	· · · · · · · · · · · · · · · · · · ·	ner's cost		
Sound				
Non-sound				
Additional information:				
*Attach images of set up	and floor plan			
For sound activations, kind		following detai	ls (if applicable):	
<u>Designation</u> <u>N</u>	ame			
MC				
Artist/Performer				

Thank you for taking the time to complete this form, we will revert with a formal quotation.

^{**}Sound Activations on Tuesday and Thursday between 13:15-14:00 only