

Registration Form

Please enter information as complete as possible. Starred (*) items are mandatory. Priority with Vertical Illusion will be in order of project registration forms received. All information provided will be kept confidential. Please complete and return via email to orders@verticalillusion.com or fax to (602) 404-0692

Registrant* _____ Project Title* _____

Location* _____ City _____ Country _____

Company* _____ Phone _____

Email* _____ Date* _____

General

Owner / Designer Details _____ Architect Details _____

Main Contractor Details _____ Other _____

Projects Estimated Start Time* _____

Samples

Item 1	Quantity (sheets/tile)	Item 1	Quantity (sheets/tile)	Item 1	Quantity (sheets/tile)	Item 1	Quantity (sheets/tile)
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
Others _____							

Products*

Description	Quantity (sheets)	Quantity (m ²)	Delivery Requirements
Product 1	_____	_____	or _____
Product 2	_____	_____	or _____
Product 3	_____	_____	or _____
Product 4	_____	_____	or _____
Others	_____	_____	or _____

This is a registration not a guarantee - it will be the client's responsibility to keep track of the timeline details of the job and know when it is going to bid and when the job has been secured.