

PORTSMOUTH WATER LIMITED

# WATER BOTTLE OFFER APPLICATION

School Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Contact Name \_\_\_\_\_ Tel. No. \_\_\_\_\_  
E-mail Address \_\_\_\_\_

Do you have the Headteacher's support in submitting this request? YES / NO

Number of water bottles required: \_\_\_\_\_

Number of Shrek 3 bookmarks required: \_\_\_\_\_ (Max 300)

Number of Shrek 3 doorhangers required: \_\_\_\_\_ (Max 60)

Contact Name for Delivery \_\_\_\_\_ Tel. No. \_\_\_\_\_

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I agree that the school will pay upon receipt of Invoice, a charge of 15 pence plus VAT for each water bottle delivered

Name: ..... Signature: .....

Invoice Address  
(if different from above) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**For Office Use only**

Signed for Delivery \_\_\_\_\_

Dated \_\_\_\_\_