

# ACINo.1

ORDER FORM  
2022

## 1. PARTNER'S INFORMATION:

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LEGAL NAME OF THE COMPANY:

TAX NUMBER:

REGISTRATION NUMBER:

ADDRESS:

CITY:

POSTAL CODE:

COUNTRY:

ACTIVITY:

PHONE:

PHONE 2:

DIRECTOR/CONTACT PERSON:

DIRECTOR'S PHONE NO.:

DIRECTOR'S CELL NO.:

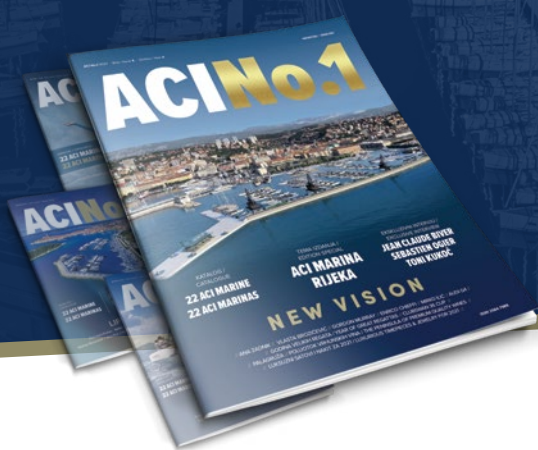
EMAIL:

WEB:

SKYPE:

FACEBOOK:

INSTAGRAM:



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## 2. PARTNER PACKAGE:

DATE:

PARTNER PACKAGE:

1/2 PAGE ADVERTISEMENT ONLY

2 PAGES PREMIUM1

1 PAGE ADVERTISEMENT ONLY

2 PAGES PREMIUM2

1 PAGE

ADDITIONAL PAGE

1 PAGE PREMIUM1

INFO

1 PAGE PREMIUM1

ACI NO.1 EDITION 2021 EXCLUSIVITY

1 PAGE BACK COVER

PUBLICATIONS DISTRIBUTION IN  
ACI MARINAS

2 PAGES

ACI NO.1 PARTNER ON  
ACI MARINA WEB PAGE:

**FILL OUT ACCORDING  
TO THE OFFER:**

CATEGORY:

PRICE:

PAYMENT DEADLINE:

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*Stamp and signature of the purchaser*