## BOX LABEL

(Must be used with all deliveries to the Hotel) (Please complete in **BLOCK CAPITALS**)

TO:	THE PLAYFORD 120 NORTH TERR ADELAIDE SA via RECEIVING BA	A	5000 /ictoria Street)		
HOTEL CONTACT:	THE PLAYFORD BANQUET DEPARTMENT (ADELAIDE ROOMS)				
EVENT NAME:	AISSA 2025		EVENT DATE: FRIDAY, 20 JU	JNE	
COMPANY NAME:					
COMPANY CONTACT:			TELEPH	IONE:	

BO	X	_ OF	_

OFFICE USE		
Date Received		
Time Received		
Received By		
Deliver to Room	 BY	HRS
Function Number		