

CROSSWORD INSTITUTIONAL PURCHASE ENQUIRY FORM

Name of the Institution: _____

Nature of work of your institution /
organisation: _____

Name of person(s) authorised to place
purchase orders or make selections: _____

Designation: _____

Address of the Institution/ Organisation: _____

Telephone nos.: _____

Fax: _____

Email: _____

Areas of interest: (Please tick)

- Business
- Biographies & Memoirs
- Children & Learning
- Computers
- Food & Drink
- Fiction
- Forthcoming
- Health & Fitness
- Home & Lifestyle
- India
- Non-fiction
- Parenting & Childcare
- Philosophy
- Religion & Spirituality
- Self Improvement
- Travel
- Music
- CD ROMs
- Toys
- Any other _____

Designated Accounts associate to be
contacted for payments: _____

Purchase Information:

Please tell us what you buy for Gifting and Internal use? _____

How many times have you bought books in the last one-year? _____

What is your annual budget for books/ gifts? _____

Did you buy products like Stationery, CD-ROMs, Music and Toys? Yes No

If yes, do you buy them for: Internal use Gifting Others _____
(Please specify)

Do you have any special needs? _____

Registration Authorised by

Name _____

Designation _____

Signature _____

Date _____

FOR CROSSWORD USE ONLY

REMARKS -----

RECEIVED ON _____

MET/ CONTACTED ON _____

IPP NO. -----

SIGNED BY -----

Please print, complete and send along with the profile of the institution/ organisation to:

Mr. Kirtiraj Kulkarni
Crossword Bookstores Limited
1st Floor, Paradigm A, Mindspace,
Link Road, Malad (West), Mumbai - 400064
Telephone: 91-22-6704 8080
Fax: 91-22-6704 8060
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