

## REQUEST FOR COOLANT & CHIP DRUMS FORM

Please complete this form to confirm your coolant needs and submit by **Friday, April 26<sup>th</sup>, 2024**

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Type of Fluid/Coolant: \_\_\_\_\_  
(Coolant provider TBC)

Amount of Fluid/Coolant: \_\_\_\_\_

Date you require fluid/coolant to be delivered: \_\_\_\_\_

Friday, June 14<sup>th</sup>: \_\_\_\_\_ Time: \_\_\_\_\_

Saturday, June 15<sup>th</sup>: \_\_\_\_\_ Time: \_\_\_\_\_

Sunday, June 16<sup>th</sup>: \_\_\_\_\_ Time: \_\_\_\_\_

Monday, June 17<sup>th</sup>: \_\_\_\_\_ Time: \_\_\_\_\_

Will you require a refill: Yes  No

# of Chip Drums: \_\_\_\_\_

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PLEASE PRINT CLEARLY

Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Booth # \_\_\_\_\_

Please email your form to [utsoi@sme.org](mailto:utsoi@sme.org) by **Friday, April 26<sup>th</sup>, 2024**