

The thirteenth Annual Meeting of the European Association of Echocardiography, a Registered Branch of the ESC, in cooperation with the Working Group on Echocardiography of the Spanish Society of Cardiology.

#### Please return this form to:

The Congress & Industry Services Department The European Heart House, 2035 Route des Colles, Les Templiers, BP 179 06903 Sophia Antipolis Cedex, France Tel: +33 (0)4 92 94 77 55 – Fax: +33 (0)4 92 94 76 26 E-mail: <u>EEexhibition@escardio.org</u>

# **EXHIBITION SPACE APPLICATION FORM**

### **DEADLINE: 29 MAY 2009**

Complete in MS Word or use a typewriter to avoid misinterpretations & spelling mistakes.

• Only signed forms with valid credit card details will be accepted.

## PLEASE RETURN BY FAX TO: +33 (0)4 92 94 76 26 OR CONTACT EEexhibition@escardio.org

1. COMPANY NAME & ADDRESS The official company name & address as it should appear in the official listings			
Name:			
Contact Person:			
Address:			
Postal code:	City:	Country:	
Tel:	Fax:	E-mail:	
2. CORRESPONDENCE NAME & ADDRE	SS If the correspondence address is different	from the official address above	
Name:	Name:		
Contact Person:			
Address:			
Postal code:	City:	Country:	
Tel:	Fax:	E-mail:	
3. APPOINTED COMMUNICATIONS AGENCY/APPOINTED BOOTH CONSTRUCTION AGENCY An 'out of business hours' contact telephone number is required for logistics purposes			
Name:			
Contact Person:			
Address:			
Postal code:	City:	Country:	
Tel:	Fax:	E-mail:	
4. PREVIOUS CONGRESS PARTICIPATION If your company exhibited under a different name previously or has since merged with another			
Details:			

<ul> <li>5. ACCOUNTING DATA <ol> <li>Only one invoice address may be used</li> <li>In all cases a credit/charge card number must be supplied as payment guarantee</li> <li>In the event that an invoice remains unpaid after a settlement date, the ESC reserves the right to deny access to EUROECHO 2009.</li> </ol></li></ul>			
Company or agency to be invoiced:			
Contact Person:			
Address: VAT N° Mandatory PO N°			
Postal code:	City:	Country:	
Tel:	Fax:	E-mail:	
Payment will be made by bank transfer (details will be given on the invoice) or by credit card (please fill in the following information) to the ESC.			
🗌 Visa	Eurocard/Mastercard	Amex	
Credit card N°:	Expiry Date:	Cardholder's Name:	

6. PREFERRED STAND LOCATIONS, SIZE, DIMENSIONS Price €400 per m <sup>2</sup> , reduced price for publishers €280 per m <sup>2</sup>			
Location	1 <sup>st</sup> Choice:	2 <sup>nd</sup> Choice:	3 <sup>rd</sup> Choice:
Size Requested	Length in metres:	Depth in metres:	Area in m <sup>2</sup> :
Height Requested:		Remarks:	

7. BOOTH SITE-PROXIMITY TO COMPETITORS List any exhibitors you do NOT wish in proximity to your booth, by company name			
1.	2.	3.	

8. STORAGE SPACE	
General storage required:  Yes  No	Volume m³:

<u>Cancellations:</u> Cancellations by Exhibitors should be made by letter addressed to ESC. If a reservation is cancelled by the Exhibitor after an invoice is received but before 1 October, of the year that the exhibition will take place, the amount paid will be refunded minus 50% of the total amount due. If a reservation is cancelled by the Exhibitor after 1 October 2009 no refund will be made and the total amount as invoiced is due.

Data Protection Disclaimer

You have personal date which is, according to the Law on data processing and Civil Liberties 78-17 of 6 January 1978, registered with the ESC. You have the absolute right to access, amend and oppose any use of this personal data by contacting (in writing) the ESC National Society and Member Relations Department at the above-mentioned address. Unless otherwise informed, the ESC may send you information about Its activities from time to time"

9. AGREEMENT I hereby agree to be bound by the GUIDELINES for INDUSTRY PARTICIPATION in EUROECHO 2009 Only signed forms will be accepted		
Date:	Contact Name:	Signature: