

**6-9 May 2009, Stockholm, Sweden**

**Please sign and return this form by Email or fax to:**

ESC

EuroPrevent 2008 Secretariat

The European Heart House,

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Email: EuroPreventexhibition@escardio.org

## EXHIBITION SPACE APPLICATION FORM

- **"First Come, First Served" Policy**
- **Stand Application deadline: 10 November 2008**
- Print or use a typewriter to avoid misinterpretations & spelling mistakes
- Only signed forms with valid credit card details will be accepted

### 1. COMPANY NAME & ADDRESS The company name & address as it should appear in official listings

Name:

Contact Person:

Address:

Postal code:

City:

Country:

Tel:

Fax:

Email:

### 2. CORRESPONDENCE NAME & ADDRESS If the correspondence address above is different from the official address

Name:

Contact Person:

Address:

Postal code:

City:

Country:

Tel:

Fax:

Email:

### 3. APPOINTED COMMUNICATIONS AGENCY Alternatively give details of stand design agency if applicable

Name:

Contact Person:

Address:

Postal code:

City:

Country:

Tel:

Fax:

Email:

### 4. APPOINTED STAND CONSTRUCTION AGENCY An 'out of business hours' contact telephone number is required for logistics purposes

Name:

Contact Person:

Address:

'Out of Hours' Tel:

Postal code:

City:

Country:

Tel:

Fax:

Email:

<b>5. BOOTH SIZE, DIMENSIONS</b> Price €400 per m <sup>2</sup> , Minimum 9 m <sup>2</sup> . Special price for Publishers € 250 per m <sup>2</sup>			
Size requested	Length in metres:	Depth in metres:	Area in m <sup>2</sup> :
Height requested:		Publishers :    Yes <input type="checkbox"/> No <input type="checkbox"/>	

<b>6. STAND LOCATION – PROXIMITY TO COMPETITORS</b> List any exhibitors you <b>do not</b> wish in proximity to your stand, by company name <i>Note that we cannot prevent companies assigned after you from being located in your neighbourhood</i>		
1.	2.	3.
4.	5.	6.

<b>7. PRODUCTS / SERVICES</b> List products / services to be exhibited at the EuroPREvent 2009 Congress

<b>8. ACCOUNTING DATA FORM</b>		
1. Only one invoice address may be used		
2. In all cases a credit / charge card number must be supplied as payment guarantee		
3. In the event that an invoice remains unpaid after a settlement date, the ESC reserves the right to deny access to EuroPREvent		
Company or agency to be invoiced:		Your Purchase Order Number:
Company VAT number:		
Contact Person:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	Email:
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 ESC.		
<input type="checkbox"/> Visa	<input type="checkbox"/> Euro card / Mastercard	<input type="checkbox"/> Amex
Credit / Charge Card N°:	Expiry Date:	Cardholder's name:

<b>9. AGREEMENT</b> I hereby agree to be bound by the conditions of participation outlined in the Industry Prospectus of EuroPREvent 2009 Congress.		
Date:	Contact Name:	Signature:

**Cancellations**

*Cancellations by Exhibitors should be made by letter addressed to EuroPREvent Secretariat. If a reservation is cancelled by the Exhibitor after an invoice has been raised but before **31 January 2009**, a 50% cancellation fee will apply. If a reservation is cancelled by the Exhibitor after 31 January 2009, a 100% cancellation fee will apply.*

**Data Protection Disclaimer**

*"You have personal data 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."*