EXHIBITION SPACE APPLICATION FORM
DEADLINE: 26 NOVEMBER 2010

• Please 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 ICNCexhibition@escardio.org

1. COMPANY NAME & ADDRESS The official 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 / 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: Email:

4. PREVIOUS CONGRESS PARTICIPATION If your company exhibited under a different name previously or has since merged with another
Details:

Please sign and return this form by mail or fax to:
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 76 17 - Fax: +33 (0)4 92 94 76 26
Email: ICNCexhibition@escardio.org
5. PREFERRED BOOTH LOCATIONS, SIZE, DIMENSIONS

Price €345 per m², reduced price for publishers €230 per m².

<table>
<thead>
<tr>
<th>Location</th>
<th>1st choice:</th>
<th>2nd choice:</th>
<th>3rd choice:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Size requested</th>
<th>Length in meters:</th>
<th>Depth in metres:</th>
<th>Area in m²:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Height requested:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. BOOTH SITE – PROXIMITY TO COMPETITORS

List any exhibitors you do not wish in proximity to your booth, by company name. Note that we cannot prevent companies assigned after you from being located in your neighbourhood.

1: 
2: 
3:

7. STORAGE SPACE

General storage required

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Volume m³:</th>
</tr>
</thead>
</table>

8. ACCOUNTING DATA

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 ICNC10.

Company or agency to be invoiced: 

Your Purchase Order Number: 

Company VAT number (mandatory for EU-based entities):

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.

- Visa
- Euro card / Mastercard
- Amex

Credit / Charge Card N°: 
Expiry Date: 
Cardholder’s name: 

9. AGREEMENT

I hereby agree to be bound by the GUIDELINES for INDUSTRY PARTICIPATION in ICNC10.

Date: 
Contact Name: 
Signature: (Mandatory)

10. MISCELLANEOUS

To add other information relevant to your application, please note it here

Cancellation Policy: Cancellations by Exhibitors should be made by letter addresses to ESC.

If a reservation is cancelled by the Exhibitor after an invoice has been raised but before 31 January 2011, a 50% cancellation fee will apply. If a reservation is cancelled by the Exhibitor after 31 January 2011, a 100% cancellation fee will apply.

“You have personal data which is, according to the Law on data processing and Civil Liberties 78-17 of 6 January1978, 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.”

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