

EXHIBITOR INFORMATION

Company Name _____	
Street address _____	No. _____
Zip/Postal Code _____	City _____ Country _____
Phone _____	Fax _____
Official Email _____	Website address _____
V.A.T. number _____	Fiscal Code _____

ADDRESS WHERE TO SEND CORRESPONDENCE (if different from above)

Company _____		Street _____	
No. _____	Postal Code _____	City _____	Country _____
Phone _____	Fax _____	Email _____	

SPACE RESERVED FOR BILLING AND INVOICE INFORMATION (if different from above)

Addressee _____	
Street address _____	No. _____
Zip/Postal Code _____	City _____ Country _____
V.A.T. number _____	Fiscal Code _____

CONTACT PERSONS OF YOUR COMPANY

Legal Representative _____	
Contact Person for Show information _____	Mobile _____
Email _____	

THE COMPANY BELONGS TO THE FOLLOWING CATEGORY:

PRODUCER <input type="checkbox"/>	DISTRIBUTOR <input type="checkbox"/>	RETAILER <input type="checkbox"/>	SERVICES <input type="checkbox"/>
TOURISM <input type="checkbox"/>	OTHER <input type="checkbox"/>		

PLEASE INDICATE YOUR PRODUCTION - (We remind you to fill in the "Catalogue Form" if you wish your data and products to be listed in the Official Catalogue)

BICYCLES <input type="checkbox"/>	CLOTHING AND EQUIPMENT <input type="checkbox"/>	PARTS AND ACCESSORIES <input type="checkbox"/>	TOURISM WITH BICYCLES <input type="checkbox"/>
SERVICES <input type="checkbox"/>	OTHERS <input type="checkbox"/>		
Production _____			

please turn overleaf →

APPLICATION & PARTICIPATION CONTRACT

IMPORTANT DEADLINES

28/02/2017

deadline for discounted rates

RATES

- 1) Registration Fee for Direct Exhibitor € 300,00 + V.A.T.
- 2) Registration Fee for Co-Exhibitor € 300,00 + V.A.T.
- 3) Registration Fee for Represented Firm € 30,00 + V.A.T.
- 4) Fee for technical and essential services € 5,00 + V.A.T. / sq.m
- 5) Exhibition Space rates per square meter:

AREA REQUEST TABLE:	BY 28/02/2017	AFTER 28/02/2017
Indoor area up to 32 sq.m	€ 75,00	€ 87,00
Indoor area over 32 sq.m e fino a 64 sq.m	€ 73,00	€ 85,00
Indoor area over 64 sq.m e fino a 128 sq.m	€ 65,00	€ 75,00
Indoor area over 128 sq.m	€ 59,00	€ 67,00
Outdoor area up to 100 sq.m	€ 50,00	
Outdoor area over 100 sq.m	€ 45,00	

EXHIBITION SPACE DESIRED (minimum 16 sq.m.: m. 4x4 and multiples)

INDOOR SPACE Tot. sq.m. _____ at € _____ per sq.m. _____

OUTDOOR SPACE Tot. sq.m. _____ at € _____ per sq.m. _____

THE EXHIBITION SPACES **ARE NOT FITTED**: THERE AREN'T PARTITION WALLS BETWEEN STANDS, CARPET AND FURNITURE.

HOW TO CALCULATE THE DEPOSIT (please attach copy of the down payment receipt to this application form)

Further to the participation request and as stated in the General Regulations, the undersigned Company pays:

- Registration fee for Direct Exhibitor (stand Administrator)	€ 300,00 +
- Deposit equal to 30% of the amount due for the exhibition space desired	€ _____ =
	Total € _____ +
	22% V.A.T. € _____ =
	TOTAL € _____

Prices will not be subject to 22% VAT if you have indicated your VAT registration number on the application form.

TERMS OF PAYMENT:

Please enclose the receipt of payment € _____ as deposit for the exhibition area desired; payment is made to E. A. Fiere di Verona by:

Bank transfer to Banco Popolare Ag. Cassa Mercato IBAN: IT90K0503411751000000031508 Swift: BAPPIT21011

If the payment is made by bank transfer please indicate clearly: **COSMOBIKE SHOW and Company Name.**

We remind the exhibitors that Veronafiore accepts only Application Forms duly filled in and signed, accompanied by copy of the receipt for the deposit due. **Verbal requests, and forms not accompanied by the required documentation will not be taken into consideration.** Acceptance of the "Application Form" is subject to the regularization of outstanding payments, to the availability of the exhibition area and to the rules stated in General Regulations which the Exhibitor has carefully examined and which are hereby approved and accepted in full. Balance of sums due for exhibit areas: 31 July 2017. The Exhibitor herewith recognizes the legal validity of the terms of participation and specifically approves Artt. No. 3, 4, 5, 6, 7, 8, 10, 11, 12, 13, 14, 16 of General Regulations.

THE LEGAL REPRESENTATIVE OF THE COMPANY

_____ (date)

_____ (Company Stamp and legible signature)

**N.B.: PLEASE PHOTOCOPY THIS FORM AND KEEP IT FOR YOUR RECORDS
INCOMPLETE DOCUMENTATION WILL NOT BE ACCEPTED**