

ICB 2015 FORUM - 19>21 NOVEMBER 2015

EXHIBITOR REGISTRATION FORM



P L E A S E W R I T E I N C A P I T A L L E T T E R S

COMPANY DETAILS

COMPANY NAME:

ADDRESS:

POST CODE:

CITY:

COUNTRY:

TELEPHONE:

FAX:

WEBSITE:

COMPANY EMAIL:

CONTACT (FOR OPERATIONAL FOLLOW-UP)

MR/MRS (SURNAME, GIVEN NAME):

JOB TITLE:

TELEPHONE:

MOBILE PHONE:

EMAIL:

CHAIRMAN/MD/DIRECTOR: MR/MRS

AFRICA/EMEA EXPORT DIRECTOR:

EXPORT EMAIL:

BILLING ADDRESS (IF DIFFERENT FROM THE EXHIBITOR ADDRESS)

EMAIL (MANDATORY FOR RECEPTION OF ACCOUNTING DOCUMENTS):

COMPANY NAME:

ADDRESS:

POST CODE:

CITY:

COUNTRY:

TELEPHONE:

MOBILE PHONE:

FAX:

CONTACT NAME:

JOB TITLE:

INTRA-COMMUNITY VAT NUMBER:

BUSINESS SECTORS (MANDATORY FOR THE VALIDATION OF YOUR APPLICATION)

1	2	3
---	---	---

A – BASIC SHELL PACKAGE (MINIMUM 12M²)

SURFACE M² X 365 € Excl. VAT /M² = € Excl. VAT

B – EQUIPPED SURFACE PACKAGE

SURFACE M² X 425 € Excl. VAT /M² = € Excl. VAT

(Stand size: 6, 8, 12 m²)

Your stand is equipped with: partitions • 1 table + 2 chairs • 1 waste paper basket • 1 banner with Exhibitor name
• 1 side sign with stand number • 1 3 kW electric box • 1 light (100 W spotlight for 3 m²) • carpet and daily stand cleaning.
For other specific furniture and fittings, please contact us.

C – REGISTRATION FEES (MANDATORY)

Included: presence on the event web site • presence in the catalogue • 6 m² stand: 2 exhibitor badges • 8 m² stand: 6 exhibitor badges
• 12 m² stand: 8 exhibitor badges • forum catalogue • exhibitor insurance.

EXHIBITOR 450 € Excl. VAT

CO-EXHIBITOR X 450 € Excl. VAT = € Excl. VAT

Registration fees are mandatory for each exhibitor present on the stand.

D – REPRESENTED BRANDS

Registration fees are mandatory for each represented brand (company not present on the stand).

NUMBER OF BRANDS REPRESENTED X 100 € Excl. VAT = € Excl. VAT

TOTAL A + B + C + D + E = **€ Excl. VAT**

VAT = **€**

TOTAL Incl. VAT = **€ Incl. VAT**

I, the undersigned, hereby declare that I have read the Invest in Congo Brazzaville 2015 Forum General Regulations and Terms and Conditions of Sale, a copy of which is in my possession, and that I accept them without reserve or restriction.

Signed in:

On:

Signee's Name and Job Title:

Your participation will only be final upon validation of your application by the Organiser.

I hereby declare that I am aware of the features of the insurance policy taken out by the Organiser and that I and my insurers waive any claim for damages against the company, its insurers or any other exhibitor or any other party acting on behalf of the aforementioned parties.
You may from time to time receive offers relevant to your business from ICB2015 / DIFCOM.
If you do not wish to receive such offers, please write to ICB 2015 / DIFCOM – 57 bis rue d'Auteuil – 75016 Paris. Fax: +33 1 44 30 18 32 - info@icb2015.com.

SIGNATURE

PAYMENT TERMS

Please return to: ICB 2015 / DIFCOM
By mail: 57 bis rue d'Auteuil – 75016 Paris – France
Or by email: info@icb2015.com

- I pay € representing 50% of the total registration fee Incl. Tax, and I commit to pay the balance, 50% of the total Incl. Tax, by 30 September 2015. Registration forms must be accompanied by the first payment mentioned.
- I pay the full amount due with my order on signature and benefit from a 2% rebate.
If my application is submitted after 30 September 2015, I commit to pay 100% of my registration fee immediately and no rebate will be applicable.

Payment by bank transfer:

Mandatory mention of **"No charges to the Beneficiary"** on all transfer orders. VAT is only applicable to companies whose tax residence is located in France. For companies based in the European Union, please mention your intra-community VAT number.

BANK : SOCIÉTÉ GÉNÉRALE

IBAN: FR76 3000 3030 1000 0201 7650 344

BIC : SOGEFRPP

PURPOSE: ICB 2015

INTRA-COMMUNITY VAT NUMBER: FR 09.320.217.078

