



“REPRESENTED FIRM” FORM

To be filled in by the firm which presents its products or services on the booth of a direct exhibitor without his own personnel

(1 form per represented firm. Please use photocopies of this form if X... represented firms)

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| RESERVED FOR THE SHOW AUTHORITIES | | | |
|-----------------------------------|--------------|-----------------------|------------------|
| DATE OF RECEIPT | CUSTOMER NO. | PAYMENT FOR DIRECTORY | REGISTRATION NO. |

26th SPACE

Tuesday 11 - Wednesday 12 - Thursday 13 - Friday 14 September 2012

I - MANDATORY APPLICATION

A - Represented Firm:

Name or business name:

Full Address:.....

Tel.: Fax:

e-mail:..... @ Web site: www.

Person to contact : Mr Mrs

B - Precise activities of the Represented Firm:

in French:

in English:.....

C - Products, services, equipments exhibited at the 26th SPACE

(To be filled in by the exhibitor - see enclosed nomenclature)

N°..... N°..... N°.....

Direct exhibitor:

Name or business name:

City:.....

II - COMPULSORY REGISTRATION IN THE EXHIBITORS DIRECTORY

Registration fee :

| | |
|-------------------------|----------|
| Amount exclusive of tax | 195,00 € |
| V.A.T. (19,6 %) | 38,22 € |
| Total inclusive of tax | 233,22 € |

Invoice to your company
 your direct exhibitor

| | |
|--|--------------------------|
| <i>Manufacturer's stamp (imperative)</i> | <i>Read and approved</i> |
|--|--------------------------|