

Exhibitor Application Form

Please complete and return



69 Dee Street, Aberdeen AB11 6EE, Scotland. Tel: 01224 210122 Fax: 01224 210126

| | | |
|--|------------------|-------------|
| Name of Exhibition | 1 | |
| Town/City | 2 | |
| First stand choice | 3 | |
| Second stand choice | 4 | |
| Dimensions required <i>Except for poster sites</i> | WIDTH 5 m | X DEPTH 6 m |
| Total area required <i>Except for poster sites</i> | 7 m ² | |
| Please state whether shellstand, floorspace, showstopper or poster site | 8 | |
| Total Cost (Exclusive of VAT) | 9 | |
| | 10 | |
| | 11 | |
| Deposit enclosed - 35% of total cost - plus VAT | 12 | |

NOTE:
 1. Floorspace includes carpet*
 2. Shellstand includes:
 carpets*, walls and fascia board with exhibitor
 name and stand number
 * subject to location within hall. Check with organisers.

| | |
|------|-----------------------|
| FREE | Stand cleaning |
| FREE | Security |
| FREE | Complimentary tickets |
| FREE | Catalogue Entry |

Cheques should be made payable to DON-MOR PRODUCTIONS LTD
NOTE: Applications cannot be processed unless accompanied by the correct deposit.
 A VAT invoice will be issued on receipt of your deposit together with a PRO-FORMA invoice for the balance due.

| | |
|--|----|
| Products/services to be exhibited | 13 |
| Name to appear on Fascia Board <i>(for those with shellstands only)</i> | 14 |

| | | |
|-----------------|----|--|
| Name of Company | 15 | |
|-----------------|----|--|

NOTE: In the case of a limited company this application must be signed by a Director or duly authorised Executive and, in the case of a partnership, a partner.

| | | | |
|--------------|----|--------------------------------|----|
| Contact Name | 16 | Signed | 21 |
| Position | 17 | Position | 22 |
| Address | 18 | Date | 23 |
| | | Invoice Address (if different) | 24 |
| | | | |
| Telephone | 19 | | |
| Email | 20 | | |

I/We have noted the Rules & Regulations and in the event of this application being granted undertake to be bound by them.