

EXHIBITION AGREEMENT

Details for the Invoice:

Company _____

Address _____

City _____ Zip/Post Code _____ Country _____

Company VAT Number (for the invoice) _____

Tel.: _____ Fax. _____ e-mail _____

Contact Person _____

Please reserve space/s No./s _____ (1st choice) or _____ (2nd choice)

Before reservation check the the map of the distribution area.

PRICE: Space of 6 sq. m. (3x2 m) 2.500 € (Vat included)

Above price includes: 1 table, 3 chairs, separate walls of 1 mt high & exhibitor's name with standard letters and electricity. 1 Registration Fee is also included (dinners not included).

Please specify the Name for the letter:

Stand will be at your disposal at 13 hrs aprox. on 23rd October.

PAYMENT:

The reservation will be effective by payment of the total amount (free of charges to the receiver) and must be attached to this Agreement . Please, mark one:

By bank transfer to: BANCO SANTANDER CENTRAL HISPANO, (c/o TUI ESPAÑA TURISMO SA), Avda. Alejandro Roselló, 11 - 07004 Palma de Mallorca.

Account number: ES68 0049 1853 17 2310096665

BIC Code: BSCHESMM

Provide the Name of the Company and the Reference "Exhibition FoodInnova"

IMPORTANT NOTICE

Spaces will be assigned by reception of the agreement and payment. Invoice will be after payment. If you need, we can send you a pro-forma invoice.

Date _____ Stamp and signature _____



Please send this form together with the draft or copy of your bank transfer to:

ULTRAMAR EVENT MANAGEMENT - Technical Secretariat

Tel.: +34 96 352.81.61 - Fax.: +34-96 394.11.58

E-mail: ccortina@ultramarevents.com, foodinnova2010-registration@ultramarevents.com

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