



# “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)

Rue Maurice Le Lannou  
CS 54239  
35042 Rennes Cedex  
FRANCE

Tél. 33 (0)2 23 48 28 80  
Fax 33 (0)2 23 48 28 81

e-mail : info@space.fr

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

## 24<sup>th</sup> SPACE

Tuesday 14 - Wednesday 15 - Thursday 16 - Friday 17 September 2010

### 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 24<sup>th</sup> 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 190,00 €

V.A.T. (19,6 %) 37,24 €

Amount inclusive of tax 227,24 €

Invoice to  your company

your direct exhibitor

Manufacturer's stamp (imperative)

Read and approved