



ORDER FORM 7: STANDARD STAND FASCIABOARD

PLEASE COMPLETE IN FULL & FORWARD AT LEAST 25 DAYS BEFORE THE OPENING OF THE EXHIBITION
 In Charge: Mrs Maria Koloni Tel: +30 2310 253173 / Fax: +30 2310 253169 email koloni@exposystem.gr

STAND No :

EXHIBITION : **PLACE :**

COMPANY : **IN CHARGE :**

V.A.T. No./OFFICE : **TEL :** **FAX :**

PROFESSION : **ADDRESS :** **Postal Code**

Please fill in the space below with the name of the company or institution that you wish to appear on the stand's fascia-board.

If there is no completion of the form, the name appearing on the fasciaboard will be the one provided by the organizer.

SIGNATURE & EXHIBITOR'S STAMP

DATE.....