		EXHIBITION	APPLICATION	CONTRACT	
	Application Date	6/28/2022			* Mandatory Fields
EXHIBITOR	Company Name*				
	Country*			City*	
	Address*				
	Facia/Brand Name*			Website	
	Products/Services*			Phone Number	
	E-Mail*			Mobile Number*	
PEOPLE	Authorised Signatory*			Mobile Number	
	Payment Officer			Mobile Number	
	Exhibition Officer*			Mobile Number*	
	Exhibition Officer E-mail*			Alternative Phone No	
SERVIC: PAYM		Quantity	Unit	Unit Price (USD)	Cost (USD)
	Required Space		m2	348	
	Total Cost (USD)				
- This invoice is final with payment and is non-refundable					
	Authorised Signatory in the Name of Exhibitor		Authorised Signatory in the Name of Organiser		
SIGNATURES					
BUSINESS GROUND G R O U P					