

EXHIBITION

APPLICATION FORM



9 – 12 July 2007, Cairns, Australia

CONTACT DETAILS Please note all correspondence including invoices will be sent to the contact supplied below.

Company Name Contact Person

Position Email

Telephone Fax

Address

State Postcode

Country Website

Products/Services to be exhibited

EXHIBITION BOOTH REQUIREMENTS

Priority of placement within the exhibition will be offered to sponsors first and then sold in accordance with the date of application receipt.

Exhibition Opportunity: *All prices are exclusive of 10% Australian GST (Goods and Services Tax).*

Tick	Opportunity	Cost (AUD)	Total sqm required	Total AUD including GST
	1) Deluxe 2.4m x 3m booth (7.2 sqm) (carpet floor)	AUD 2,000 plus 10% GST		

Declaration: *I have read and accept the terms & conditions in the exhibition & sponsorship prospectus and wish to become an exhibitor at ICSV14.*

I agree to be invoiced for a total of AUD including 10% GST.

Signature Date

PAYMENT SCHEDULE *(tick appropriate box)*

- I wish to make full payment at the time of application confirmation
- I wish to pay 50% of the total owing upon application confirmation and the remaining 50% before 30 April 2007

PAYMENT METHOD *(tick appropriate box)*

- I wish to pay by cheque. Cheque payable details will be supplied on your tax invoice issued with placement confirmation.
- I wish to pay by credit card - Visa MasterCard Bankcard Amex Diners Club. **Please debit my card AUD inc. GST**

Credit Card Number: _____ / _____ / _____ / _____ Expiry Date: ____ / ____

Signature: _____ Date: _____

Please Note: All credit card payments will appear as "ICMS Australasia" on your statement and will incur a 5% surcharge.

- I wish to pay by bank transfer. Bank details will be supplied on your tax invoice issued with placement confirmation.

- Please tick this box if you do NOT wish to receive Conference Updates via email

POST OR FAX YOUR COMPLETED APPLICATION FORM TO :

Sponsorship & Exhibition Operations Manager
ICSV14
GPO Box 3270, Sydney NSW 2001, Australia
Phone: +61 2 9254 5000

Email: fallons@icmsaust.com.au
Website: www.icsv14.com

FAX: +61 2 9251 3552