**EXHIBITION AND SPONSORSHIP REGISTRATION FORM**

**Details of the exhibiting company**

Name of the company:

Department:

Address:

Zip/ Postal Code:

City:

Country:

Phone:

Fax (optional):

E-mail:

Logo (optional):

Fiscal Identification Code (CUI):

**Details of the delegate** (for more than one delegate, please fill out one form for each)

Title (please delete or cut what is not appropriate): Prof. Dr. Mr. Mrs. Ms.

Family Name (Surname):

First Name:

E-mail (if different from company e-mail):

I plan to attend the touristic program and gala dinner: yes/no.

Date of arrival:

Date of departure: