

Exhibitor Registration Form

Registration can be made online at www.icf-ecc.org or by completing this form in capital letters and returning it to:

Dominique Ringler
 Phone : + 32 2 306 46 77 – Mobile : + 32 475 70 73 64
 Email: dominique@icf-ecc.org

Company name		Managing Director name	
ICF Contact person			
Street Address			
City		Zip/Postal code	Country
Email address			
Phone number (please include country code)		Fax number (please include country code)	
+		+	
Special Requirements (dietary, reduced mobility, ...)			

Exhibitor packages

Date	Event	Exhibitors	Specifications	Packages
May 18 th and 19 th /20 th	Business Day & Coaches Days	ACTP only Academics Media	3 days FLOOR 1	A,B,C
May 19 th & 20 th	Coaches Day	Open	2 days FLOOR 2	D,E

PACKAGES	A	B	C	D	E
FLOOR	1	1	1	2	2
BOOTH NUMBER	1, 10, 4, 5	2, 3, 6	7, 8, 9	1, 2, 3 4, 5,10	6, 7, 8, 9

PRICE in €	7500	5300	3000	4300	2000

Package order

	Package	Booth preference (please indicate your choice)	Price in €	30% Deposit
<input type="checkbox"/>	A		7500€	2250€
<input type="checkbox"/>	B		5300€	1590€
<input type="checkbox"/>	C		3000€	900€
<input type="checkbox"/>	D		4300€	1290€
<input type="checkbox"/>	E		2000€	600€

VAT exempted (Belgian VAT code 44 \$ 2, 11°)

Elements ordered & invoiced separately	Unit Price in €	Number	Number of day	Total Price in €
Panel (2x1M)	25€ per panel per day			
Internet, WIFI	20€ per card per day			
Internet, ADSL	50€ per line per day			
Table	5€			
Chairs	Free			
TOTAL				

VAT exempted (Belgian VAT code 44 \$ 2, 11°)

Staff & participants

- Number of support staff for booth only : 4 2 1

STAFF 1 - First & middle name	Family name
E-mail address	
STAFF 2 - First & middle name	Family name
E-mail address	
STAFF 3 - First & middle name	Family name
E-mail address	
STAFF 4 - First & middle name	Family name
E-mail address	

- Number of accredited participants: 2 1

PARTICIPANT 1 - First & middle name		Family name
Company name		
Street Address		
City	Zip/Postal code	Country
Email address		
Phone number (please include country code)		Fax number (please include country code)
+		+

PARTICIPANT 2 - First & middle name		Family name
Company name		
Street Address		
City	Zip/Postal code	Country
Email address		
Phone number (please include country code)		Fax number (please include country code)
+		+

Order validation

- Exhibit Applications **must include at least a 30% deposit of standard amount due** .
- You will be invoiced separately for the final payment
- You will be invoiced separately for any extra elements ordered.
- All final payments are due by **February 1st, 2006**. Applications received after February 1st 2006, must include full payment. All payments must be in Euro
- Booth numbers will be assigned on a first-come first-served basis based on your preference within the defined possibilities.
- Until payment in full is received, your exhibit space assignment will not be released (**space will not be confirmed without final payment**)

Cancellation and refund policy

- The ECC 2006 reserves the right to decline an application without cause. If an application is refused, the amount paid + transfer expenses will be reimbursed as soon as possible and at the latest within 14 days after the payment was received.
- All cancellations must be submitted in writing to the following e-mail address: info@icf-ecc.org.
- Cancellations will result in a refund minus EUR 250 administrative fee through February 1st, 2006, and a refund minus a 50% administrative fee through March 15th, 2006.
- Any cancellations received or postmarked on or after March 15th, 2006 will receive no refund. The ECC 2006 will not make any exceptions to this policy.

