

A BOOKING FORM COMPANY

1. DATA FOR CONTRACT HEADING AND INVOICING

Company _____ VAT number / fiscal code _____
 Address _____ ZIP code _____
 City _____ Country _____
 Tel. _____ Fax _____

2. EXHIBITOR'S DATA

Company _____ VAT number / fiscal code _____
 Address _____ ZIP code _____
 City _____ Country _____
 Tel. _____ Fax _____
 e-mail _____ www _____
 Contact person _____ Position _____
 tel. _____ mob. _____ e-mail _____

3. BIOTECH - SMART HEALTH

Tick box as required Biomedical technologies, in vivo and in vitro diagnostics Medical informatics and bioinformatics Innovative therapy Technologies for Ambient Assisted Living (AAL) Other

Description: _____

4. REQUEST FOR EXHIBITION AREA

A	PRICE	TICK BOX	TOT A
<ul style="list-style-type: none"> EQUIPPED SPACE/SHELL SCHEME BOOTH: 6 mq. (m3 x m2) area, perimeter walls, electrical socket 220v, booth identification sign, 1 table, 3 chairs, 1 wastebasket; Badges for Exhibitors (1 Each 2sqm – Max 6) Match Making Program – B2B Nr. 1 Scientific Poster Exhibit Nr. 2 Speech on Stage – 8 minutes each 	€ 1.200,00 Early Bird 24/6/18 € 1.050,00	N° <input type="checkbox"/>	€ _____
B	PRICE	TICK BOX	TOT C
Nr. 2 Speech on Stage – 8 minutes each	€ 400,00	<input type="checkbox"/>	€ _____
C	PRICE	TICK BOX	TOT D
Co-exhibitor fee	€ 400,00	<input type="checkbox"/>	€ _____
TOTAL = A+B+C =			€ _____ + 22%VAT if applicable

In accordance with D.lgs. 196/03, I authorize the Organizer to treat even electronically the data provided in this form for communications and commercial promotions concerning the activities of the Fair, statistical processing, analysis and market research, historical information archiving. You may cancel, your data at any time by sending an e-mail to: info@ebht.it subject: cancel ebht.

Place and Date

Place and Date

application form – sent to: info@ebht.it

B DATA FOR ONLINE CATALOGUE and CO-EXHIBITORS REGISTRATION

>> **EXHIBITORS DATA** (TYPE OR WRITE IN BLOCK CAPITAL LETTERS)

Company Name _____ VAT number / fiscal code _____
Address _____ n. _____ ZIP _____
City _____ Country _____
Tel. _____ Fax _____
e-mail _____ www _____

Company Profile: _____

Partnerships and collaborations : _____

Category:

Biomedical technologies, in vivo and in vitro diagnostics:

- technology for medical devices development
- diagnostic imaging systems
- biomaterials and bioreactors (regenerative medicine)
- microelectronics
- advanced microscopy
- technology for human diagnostics and clinical evaluation
- technology for food diagnostics (quality, traceability and safety),
- technology for veterinary and environmental diagnostics.

Medical informatics and bioinformatics

- technological solutions for hospital informatics, social and health informatics
- informatics for bio-imaging
- informatics for medical laboratory and blood bank
- innovative software systems and solutions for personalised medicine
- software systems and solutions for biomedical and biotechnology instrumentation

Innovative therapy

- biotech drugs or customised biopharmaceuticals
- nutraceutical, probiotics
- technologies for cell therapies, gene therapies, small molecules
- biomaterials

Technologies for Ambient Assisted Living (AAL)

- telemedicine
- telecare
- home automation
- health aids, as well as other products and services for the prevention and the welfare of citizens

i **Additional notes:**
CO-EXHIBITORS:

Fill in carefully with your co-exhibitors data for the online catalogue.
Companies present in the booth of the direct exhibitor with their own staff and products/services

application form – sent to: info@ebht.it

The Organizer is not liable for errors or omissions in the Official Expo Catalogue.

>> **CO-EXHIBITOR** (TYPE OR WRITE IN BLOCK CAPITAL LETTERS)

Company Name _____ VAT number / fiscal code _____
Address _____ n. _____ ZIP _____
City _____ Country _____
Tel. _____ Fax _____
e-mail _____ www _____

Breve Descrizione Attività:

Eventuale Partnership e collaborazioni:

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Place and date

Stamp and Signature