

CONTRACT BETWEEN THE ORGANISER AND THE EXHIBITOR

PLEASE, SEND COMPLETED IN CAPITAL LETTERS FORM NOT LATER THAN:

until 31.01.2006 (in case of full payment for the stand)

or until 31.10.2005 (in case of using rebates)

reference number _____

Exhibitor (full name of the company) _____

KRS or Activity Reg. No. _____ NIP _____

Person Authorised to Represent the Exhibitor _____

Street _____ ZIP Code _____ Place _____

Area Code _____ Telephone _____ Fax _____

E-mail _____ WWW _____

Person Responsible for Participation in the Exhibition _____

We are a member of the Association of Dental Manufacturers and Distributors (SPIDS) YES NO **REGISTRATION FEE**SPIDS members **200 zł** other **500 zł****PRICES FOR THE AREA OF THE EXHIBITOR'S STAND'S**

basic (full) in case of payment until 31.03.2006	100 EUR/1m²	50% prepayment until 31.10.2005 and 50% until 31.01.2006	70 EUR/1m²
50% prepayment until 31.01.2006 and 50% until 31.03.2006	90 EUR/1m²	100% prepayment until 31.10.2005	65 EUR/1m²
100% prepayment until 31.01.2006	80 EUR/1m²	additional discount for SPIDS members	5 EUR/1m²

We hereby order m² of exhibition area x EUR/m² = EUR (+22% VAT) as:1. semidetached stand - open one side (min. 6 m²) 3. peninsular stand - open on three sides (min. 64 m²) 2. corner stand - open on two sides (min. 32 m²) 4. island-like stand - open on four sides (min. 128 m²) We shall pay the registration fee in the amount of PLN within 7 days since declaration of our participation. The payment for the standshall be made according to the declaration concerning the cost of 1 m²: 50% until 50% until or 100% until **NOTE:**

Exhibitors with equipment are asked to specify the size and shape of their stands individually. Exhibitors ordering 'islands' will take part in drawing of stands at the entrances. Stand location depends on its size, the time of filing of the application, and the time of the first payment.

PAYER (IF DIFFERENT THAN THE COMPANY APPLYING)**WE DECLARE THE PARTICIPATION OF THE FOLLOWING SUBEXHIBITORS**Company 1 _____ area in m² _____ Company 2 _____ area in m² _____

1. After each prepayment comes into the Organiser's bank account, the Organiser shall issue a VAT invoice not later than within 7 days after the income of the funds.

2. The prices will be increased by the amount of the VAT according to the current rate.

3. We undertake to pay the amounts resulting from this Application and the Terms and Conditions of Participation to the Organiser's Bank Account: **PKO BP IX Warszawa 13 1020 1097 0000 7302 0108 3294**

4. We hereby authorise the Organiser to issue VAT invoices without our signatures.

After familiarisation with the Terms and Conditions of Participation, as contained in the regulations forming an integral part of the Contract between the Organiser and the Exhibitor, we hereby undertake to observe them.

date _____

Signature of an authorised person, according to the KRS (Court Register) entry and company stamp _____

NOTE: Each Application for Participation in the exhibition has a unique reference number which should be mentioned in future correspondence. After the approval of the above application, the remaining forms will be sent to the Exhibitor.

IDF sp. z o.o., ul. Gamerskiego 7/4, 00-089 Warszawa, Poland, NIP: 525 233 61 91

Correspondence address: ul. Instalatorów 7 B, 02-237 Warszawa, Poland, tel./fax: +48 22 846 04 26, e-mail: idf@idf.net.pl, www.idf.net.pl

Association of Dental Manufacturers and Distributors (SPIDS), ul. Augustówka 14, 02-981 Warszawa, Poland, NIP: 739 33 52 968

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