



CYPRUS INTERNATIONAL EDUCATION AND CAREER EXHIBITION 2015 13-15 March 2015 www.edufair-cyprus.eu







APPLICATION FORM

A. THE APPLICANT
Name of Exhibitor:
☐ University ☐ College ☐ Other, please specify:
Company registration number:
Address:
P.O.Box: City:
Contact Person:
Position:
Contact Phone(s): Fax:
Email:
i) Exhibition space including shell scheme stand @ €85.00 + V.A.T We wish to reserve booth number(s)
I enclose a cheque with number, bank namepayable to "The Cyprus International Education and Career Exhibition 2015"
Payment method B. Bank transfer
Account Holder: "The Cyprus International Education and Career Exhibition 2015" Account and Bank details will be provided on the participation invoice.
E. DECLARATION We hereby confirm our intention of participate at the <i>Cyprus International Education and Career Exhibition 2015</i> and we confirm that we have read and accepted the <i>Rules of Participation</i> . Name of Signatory: Signature and stamp:
Name of Signatory.