

**Form 1 : APPLICATION FORM**

Please type in **BLOCK LETTERS AND ENGLISH VERSION**. The Organizer will not be held responsible for any errors or omission arise thereof.

## THE 31<sup>st</sup> INDONESIA INT'L HOSPITAL EXPO - 2018

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To : Organizer The 31<sup>st</sup> Indonesia Int'l Hospital Expo, 17 – 20 Oct 2018, Jakarta Convention Center  
 Fax : +62.21 58906819 – 20 Email. : hospital.expo@gmail.com

**We apply exhibit at Int'l Hospital Expo 2018 as per the particulars mentioned below and agree on the procedures prescribed by the organizer.**

**I. EXHIBIT DATA ;**

Name of Company : \_\_\_\_\_

Address: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax. \_\_\_\_\_

Website: \_\_\_\_\_ Email: \_\_\_\_\_

Block/No. Stand : \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Name of Director: \_\_\_\_\_

**II. EXHIBIT SPACE COST;**

<i>AREA</i>	<i>STANDARD BOOTH</i>	<i>SPACE ONLY</i>
Main Lobby (3m x 3m)	<input type="checkbox"/> USD 4.000	<input type="checkbox"/> USD 3.927
(5m x 3m)	<input type="checkbox"/> USD 6.667	<input type="checkbox"/> USD 6.545
Assembly Hall (3m x 3m)	<input type="checkbox"/> USD 3.600	<input type="checkbox"/> USD 3.527
Pre-function Hall A (5mx6m)	-	<input type="checkbox"/> USD 15.675
Hall A (3m x 3m)	<input type="checkbox"/> USD 3.500	<input type="checkbox"/> USD 3.427
Connecting Hall A-B (3m x 3m)	<input type="checkbox"/> USD 3.300	<input type="checkbox"/> USD 3.227
Hall B (3m x 3m)	<input type="checkbox"/> USD 3.300	<input type="checkbox"/> USD 3.227

**III. EXHIBIT NAME DISPLAYED ON FASCIA BOARD/BOOTH for STANDARD BOOTH ONLY ;**

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Name & Title of Personnel:

Authorized to Sign:

Date:

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**AFTER RECEIVE THIS APPLICATION FORM, ORGANIZER WILL PUBLISH CONTRACT TO BE SIGNED & DIRECTORY LISTING FORM TO BE FILLED**