



Satellite Sponsor Manual

Order Form 1

List of Delegates

Deadline: 4 March 2010

Company name: _____

Phone no: _____ Fax no: _____

E-mail: _____

Contact name: _____

Yes, we would like one list of delegates **free of charge** three months prior to the Congress.

Yes, we would like an additional list of delegates **at a fixed cost of EUR 60 + EUR 0,50 per address (+VAT)**. We would like to receive the list on the following date:

Please note that the list will be sent as an email attachment in an excel format. The list will be forwarded to the contact name and via email to the address given above.

Use of the EAACI 2010 Congress logo and EAACI logo

Yes, we would like to have the EAACI 2010 logo and the EAACI logo for the bag insert.

Company Presentations

Name by which the Company should be known in all future printed items:

Signature: _____

Date: _____

Return this order form to:

Congrex Sweden AB

Attn: EAACI 2010

Telephone: +46 8 459 66 00

Fax: +46 8 661 91 25

E-mail: eaaci2010exhibition@congrex.com



Satellite Sponsor Manual

Order Form 2

Hostesses / Bar Code Readers

Deadline: 4 May 2010

Company name: _____

Phone no: _____ Fax no: _____

E-mail: _____

Contact name: _____

Session Hall: _____

Hostesses for Satellite Symposium

Cost EUR 110 (+VAT)/hostess. Additional hour: EUR 45 (+VAT).

Yes, we would like to order hostesses for the following:

- Sunday 6 June 2010 17.00 – 19.30 hrs
Number of hostesses/hosts needed: _____
- Monday 7 June 2010 17.00 – 19.30 hrs
Number of hostesses/hosts needed: _____
- Tuesday 8 June 2010 17.00 – 19.30 hrs
Number of hostesses/hosts needed: _____

Bar Code Readers

Scan Logic Lead Retrieval Scanner. Cost EUR 280 (+VAT)/scanner.

Yes, we would like to order Bar Code Readers for our Satellite Symposium

- Sunday 6 June 2010 17.00 – 19.30 hrs
Number of Bar Code Readers needed: _____
- Monday 7 June 2010 17.00 – 19.30 hrs
Number of Bar Code Readers needed: _____
- Tuesday 8 June 2010 17.00 – 19.30 hrs
Number of Bar Code Readers needed: _____

Signature: _____

Date: _____

Return this order form to:

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