



POLITECNICO
DI MILANO

IABMAS 2012

6th International Conference on
Bridge Maintenance, Safety and Management

Stresa, Lake Maggiore, Italy, July 8-12, 2012

Exhibitors Registration Form

Please send this form to the Organizing Secretariat by email at secretariat@iabmas2012.org or fax: +39-030-383290

1. Company Information

Company Name			
VAT or Tax ID No.			
Contact Name	(Last)	(First)	(Middle Initial)
Name Exhibitor #1	(Last)	(First)	(Middle Initial)
Name Exhibitor #2	(Last)	(First)	(Middle Initial)
Address			
City		State	
Zip Code		Country	
Phone		Cell Phone	
Fax		E-mail	

2. Registration Fees

Standard Booth Modules (3x2m)		Plus Booth Modules (4x2m)	
Registration Fee	Exhibit Booth Units	Registration Fee	Exhibit Booth Units
<input type="checkbox"/> € 2400 ^(*) (#)	_____	<input type="checkbox"/> € 3200 ^(*) (#)	_____

^(*) The registration fee includes: Modular exhibition carpeted and fitted booth with aluminum walls; Basic booth equipment including 1 table, 3 chairs, 1 locker, 1 waste bin, 1 electrical multiple socket (2,5 kW); Customizable B&W overhead PVC board; Conference registration as *Exhibitor* for 2 people. People registered as *Exhibitor* will have access to Welcome Reception, Lunches, Coffee Breaks and Gala Dinner. Exhibitors can also attend the Technical Sessions, but they are not allowed to present technical contributions. To present contributions full conference registration as *Delegate* is required.

^(#) 21% VAT is not included. Foreign institutions and companies (European and Worldwide) are not charged VAT provided that they can submit their tax identification number or VAT number. Italian institutions and companies subjected to VAT-exemption policies are not charged VAT provided that they can prove their VAT-exempt status. 21% VAT is due in all other cases.

3. Welcome Reception and Gala Dinner

People registered as *Exhibitors* are required to confirm attendance at the Welcome Reception and Gala Dinner:

Exhibitor #1	Welcome Reception	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	Gala Dinner.....	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Exhibitor #2	Welcome Reception	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	Gala Dinner.....	<input type="checkbox"/> YES	<input type="checkbox"/> NO

4. Payment by Bank Transfer

I ordered a payment of € _____ (Euros) to be remitted to the following bank account:

Name of Bank	Banca Valsabbina, Via Viotto, ang. Via Corsica - Brescia, ITALY				
Account Number	1185	BIC-Swift Code	BCVAIT2VCOR	IBAN Code	IT87 1 05116 11205 0000 0000 1185
Account Holder's Name	Incentives e Congressi di AM Feller		Cause	IABMAS 2012	

A copy of the bank statement with ordered payment (registration fee + 21% VAT where applicable) is enclosed. We accept herewith legally binding the conditions for participation in the Exhibition.

Date (dd/mm/yy)	_____	Signature	_____
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Cancellation requests must be sent in writing to the Conference Organizing Secretariat. Refund of the registration fees with a retain of 10% will be provided for cancellations received prior to February 29th, 2012. Refund with a retain of 50% will be provided for cancellations received from March 1st through April 30th, 2012. No refund will be provided after May 1st, 2012.

PLEASE NOTE THAT THIS FORM WILL BE ACCEPTED ONLY IF A COPY OF THE BANK STATEMENT IS ENCLOSED