

## TRADE EXHIBITION FORM

Name of the company	y:		
Name to be displayed	d on stall:		
Address	<i>:</i>		
Phone No	: Fax		
No	<i>:</i>		
Mobile No	:		
Email	<i>:</i>		
Local contact person address & phone (at Chennai):			
We would like to book	k for exhibition stall/ area	as below	
			4 (D)
Type	Numbers	Preferred location/code	Amount (Rs)
		tocation, code	
Exhibition Stall			
Exhibition Area			
			TOTAL
Payment: We are enclosing herewith a DD/local cheque No Dated			
For Rupees Drawn on in favour of IOACON2012 SPONSORSHIP			
Payable at Chennai.			

We have read and understand the rules and regulations for participating in the trade exhibition a IOACON 2012, Chennai.

**Authorised Signatory** 

- 50% Advance during the booking of the stall
- 50% balance 31st Oct 2012

If the full amount is not paid before the deadline of 31st Oct 2012 the stall will not be confirmed. Another smaller size stall of value of amount paid will be allotted and the advance amount will not be refunded.

Mail to

DR.MAYILVAHANAN NATARAJAN

Organising Secretary – IOACON 2012 4, Lakshmi Street, Kilpauk Chennai – 600 010 Tamil Nadu

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<u>Secretariat</u>

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