

## EXHIBITOR'S DETAILS

COMPANY NAME

ADDRESS

POSTCODE

CITY

PROVINCE/COUNTRY

NATION

PHONE

EMAIL

WEB SITE

TAX CODE

NATIONAL INSURANCE NUMBER

CODE SDI

PEC

VAT EXEMPT\*

\*N.B.: in case of VAT exemption (Art 8/8 bis DPR 633/72, attach to this form a signed declaration)

## BILLING DETAILS (only if different from exhibitor's details)

COMPANY NAME

ADDRESS

POSTCODE

CITY

PROVINCE/COUNTRY

NATION

PHONE

EMAIL

WEB SITE

VAT NUMBER

NATIONAL INSURANCE NUMBER

CODE SDI

PEC

VAT EXEMPT\*

\*N.B.: in case of VAT exemption (Art 8/8 bis DPR 633/72, attach to this form a signed declaration)

## CONTACT PERSON FOR INFORMATION AND COMMUNICATIONS

NAME AND SURNAME

POSITION

PHONE

MOBILE

EMAIL

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