

EXHIBITION & SPONSORSHIP ORDER FORM

| ORGANIZATION DETAILS | | | |
|--|--|--------------------------------------|---|
| COMPANY NAME: | | | |
| ADDRESS: | | POSTCODE: | |
| CITY: | | COUNTRY: | |
| TELEPHONE: | | FAX: | |
| WEB site: | | EMAIL: | |
| VAT REG. NUMBER: | | TAX AUTHORITY: | |
| ORDER PLACED BY: | | TELEPHONE: | |
| PLEASE SPECIFY HOW YOUR TITLE SHOULD APPEAR IN THE EXHIBITOR CATALOGUE: | | | |
| ON YOUR BOOTH NAME BOARD: | | | |
| TYPE OF PARTICIPATION | | | |
| <input type="checkbox"/> MANUFACTURER | <input type="checkbox"/> ENTREPRENEUR | <input type="checkbox"/> IMPORTER | |
| <input type="checkbox"/> REPRESENTATIVE | <input type="checkbox"/> EDITIONS | <input type="checkbox"/> BODY | |
| <input type="checkbox"/> GROUP PARTICIPATION | <input type="checkbox"/> ACADEMIC | <input type="checkbox"/> RESEARCHER | |
| <input type="checkbox"/> VENTURE CAPITAL | <input type="checkbox"/> R & D PROJECT | <input type="checkbox"/> SERVICES | |
| REPRESENTATIVES IN GREECE | | | |
| NAME: | | | |
| ADDRESS: | | POSTCODE: | CITY: |
| TELEPHONE: | | FAX: | |
| EMAIL: | | | |
| EXHIBITION & SPONSORSHIP PACKAGES | | Value | Choice |
| A. EXHIBITOR | | | |
| ACADEMIC 2 m ² | | € 800 | <input type="checkbox"/> |
| STARTUP 3 m ² | | € 1100 | <input type="checkbox"/> |
| MINIMAL 4 m ² | | € 1300 | <input type="checkbox"/> |
| STANDARD 9 m ² | | € 2000 | <input type="checkbox"/> |
| LARGE 18 m ² | | € 3800 | <input type="checkbox"/> |
| BANNER DISPLAY 2 m ² | | € 800 | <input type="checkbox"/> |
| B. SPONSORSHIP PACKAGES | | | |
| GOLD SPONSOR | | € 8000 | <input type="checkbox"/> |
| SILVER SPONSOR | | € 5000 | <input type="checkbox"/> |
| BRONZE SPONSOR | | € 3000 | <input type="checkbox"/> |
| C. NANOTECHNOLOGY GOODS | | € 6000 | <input type="checkbox"/> |
| D. SOCIAL EVENT SPONSOR | | | |
| COFFEE BREAK | | € 1000 | <input type="checkbox"/> |
| LUNCH | | € 2000 | <input type="checkbox"/> |
| OPENING CEREMONY | | € 4000 | <input type="checkbox"/> |
| OFFICIAL DINNER | | € 6000 | <input type="checkbox"/> |
| E. ADVERTISING SPREADS IN ABSTRACT BOOK | | <input type="checkbox"/> NN17 | <input type="checkbox"/> ISFOE17 |
| HALF PAGE | | € 300 | <input type="checkbox"/> |
| FULL PAGE | | € 500 | <input type="checkbox"/> |

| F. PROMOTIONAL MATERIAL (FLYER, BROCHURE, BOOKLET) | | |
|--|---------------|--------------------------|
| CONFERENCE BAG <i>(PLEASE CHOOSE: NN17 OR ISFOE17)</i> | € 800 | <input type="checkbox"/> |
| CONFERENCE REGISTRATION DESK | € 500 | <input type="checkbox"/> |
| EXHIBITION & SPONSORSHIP VALUE | € | |
| PLUS 24% VAT VALUE (Only for Greek Organizations) | € | |
| TOTAL SPONSORSHIP VALUE | € | |
| ADDITIONAL REPRESENTATIVE REGISTRATION | <i>Number</i> | <i>Cost</i> |
| <i>Additional representative registration is 150,00 € per person</i> note: This option is only for exhibitors and includes the extra representatives who will be present at the booth additional to the free registration (it depends on the size of the booth). It does not include the participation in the conferences. | | € |
| PLUS 24% VAT VALUE (Only for Greek Organizations) | | € |
| ADDITIONAL REGISTRATION TOTAL COST | | € |
| TOTAL AMOUNT PAYABLE | | € |
| | | |
| <i>Please fill in (handwritten) you initials</i> | | |

Please read and sign the following form:

I, the undersigned representative of the aforementioned company, whose full details appear on the first page of this Exhibition & Sponsorship Order Form, agree to pay 50% of the total amount within **five (5) days** after submission of the Sponsorship/Exhibition Order Form to the bank account below:

BANK ACCOUNT INFORMATION:

EXACT NAME AND ADDRESS OF THE ACCOUNT HOLDER:

ACCOUNT HOLDER NAME: EIDIKOS LOGARIASMOS KONDILION EREVNAS A.P.TH.

ACCOUNT HOLDER ADDRESS: KE.D.E.A. – TRITIS SEPTEMVRIOU UNIVERSITY CAMPUS

GR 54636 THESSALONIKI GREECE

NAME AND ADDRESS OF THE BANK BRANCH:

BANK NAME: PIRAEUS BANK S.A.

BANK ADDRESS: AGGELAKI, THESSALONIKI BRANCH

18 AGGELAKI STR.

GR 54 621 THESSALONIKI

GREECE

BANK ACCOUNT NUMBER: 5202-070644-291

CURRENCY CODE: EURO

INTERNATIONAL BANK ACCOUNT (IBAN): GR60 0172 2020 0052 0207 0644 291

CODE BIC (SWIFT ADDRESS) (OBLIGATORY): PIRBGRAA

NAME OF THE COVERING BANK (EURO): DEUTSCHE BANK A.G.

V.A.T.: EL 090049627

Please make sure you state your name when transferring your payment. Note that all banking costs are born by the participant.

IMPORTANT: You MUST put "YOUR COMPANY'S NAME" and the "EXHIBITOR FEE" in the field "Information" or "Comments" of your bank transfer to validate your Exhibition / Sponsorship!

At the NANOTECHNOLOGY 2017 EXPO Registration Desk you will receive all your relevant materials and can request your Invoice.

PAYMENTS

All payments have to be made in Euro (€).

In addition, I hereby agree to make the payment of the outstanding amount (remaining 50%) of the total sponsorship/exhibition cost by **July 1st 2017**. Invoicing will follow duly.

CANCELLATION POLICY: There is a cancellation fee of 50% until June 15, 2017. After June 15th, there will be no refunds.

I declare that I have read and agree to all of the Terms and Conditions outlined in this document

| <i>Full Name:</i> | <i>Date:</i> |
|-------------------------------|--------------|
| Signature & Stamp: | |

Please fill in all your information, sign and stamp the Exhibition & Sponsorship Order. Send the Order Form either by email to the expo@nanotextnology.com or by Fax: +30 2310 998390.

In case you need further assistance, please contact:

Mr Antonios Theodosiou

NANOTECHNOLOGY EXPO Manager

Lab for Thin Films – Nanobiomaterials, Nanosystems & Nanometrology (LTFN)

Physics Department, Aristotle University of Thessaloniki, Thessaloniki, 54124, Greece

Phone : +30 2310 998091

expo@nanotextnology.com