

**APPLICATION FORM TO BOOK THE SPACE**

**Organizer:**  
 Association of Pharmaceutical  
 Producers of Nepal (APPON)  
 Babarmahal, Thapathali  
 Kathmandu, Nepal

**NEPAL  
 PHARMA  
 EXPO 2008  
 February 16-17, 2008  
 A Gateway to Nepalese Pharmaceutical Industry**

**Application & License Agreement for Exhibition Participation**

**A. EXHIBITOR'S DETAIL:**

**Name of Company /Organization:** \_\_\_\_\_

Name of the Chief Executive: \_\_\_\_\_ Designation \_\_\_\_\_

Name of the Contact Person: \_\_\_\_\_ Designation \_\_\_\_\_

Address\*: \_\_\_\_\_

City: \_\_\_\_\_ Pin/Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

***\*Please note that all correspondence related to NEPAL PHARMA EXPO 2008 will be sent to this address only.***

**B. ORGANIZED BY: Association of Pharmaceutical Producers of Nepal (APPON)**

**C. DETAILS OF PARTICIPATION & OTHER CHARGES:**

Space Details			<b>Payment Details:</b>
<input type="checkbox"/> Shell Stand _____ @US\$120=00 per sq.mt		US\$ _____=00	<b>Amount:</b> _____
Preferred Booth No. _____/_____/_____	<b>TOTAL</b>	US\$ _____=00	<b>Demand Draft /Cheque</b>
Exhibition Space Requirement: _____sq.mt			<b>No:</b> _____
			<b>Dated:</b> _____
			<b>Bankers:</b> _____

**D. EXHIBIT DETAILS:**

The products or business line of the company which will be put on display at the exhibition through samples or display panels /material.

1.	2.
3.	4.

**E. MODE OF PAYMENT:**

The payment towards the exhibition has to be made by Demand Draft in favour of ASSOCIATION OF PHARMACEUTICAL PRODUCERS OF NEPAL payable at Nepal.

**PAYMENT SCHEDULE:**

Following discount is offered to those who book the stall with full payment (cash/cheque/DD).

<b>Booking before September 2007 -</b>	<b>30%</b>
<b>Booking before November 2007 -</b>	<b>20%</b>
<b>Booking before December 2007 -</b>	<b>10%</b>

NOTE: The person signing this document on the behalf of the Exhibitor Company expressly represents and assures both other parties,i.e. APPON he or she is authorized by the Exhibitor Company to execute this Agreement. The persons signing this document on behalf of the Exhibitor Company assures and acknowledges that he /she and the Exhibitor Company have read, understood and accepted the Terms & Conditions, rules and regulations as set forth on pages 2 to 4 of this Application & license Agreement annexed herewith and same from an integral part of this Agreement.

**NAME:** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**DESIGNATION:** \_\_\_\_\_ **COMPANY SEAL** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **HAND PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **WEBSITE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

\*The payment must be submitted along with this dully filled & signed APPLICATION & LICENSE  
Bank detail is **Nepal Bangladesh Bank head office Bijuli Bazar, Kathmandu swift code NPBBNPKA Current Account # 081971 'C'**.

AGREEMENT to NEPAL PHARMA EXPO2008 on the following address:

<b>ASSOCIATION OF PHARMACEUTICAL PRODUCERS OF NEPAL (APPON) Thapathali, Babarmahal, Katmandu , NEPAL</b>		<b>Tel: +977-1-4102034 , Fax: +977-1-4231871</b>	
		Email: <a href="mailto:appon@wlink.com.np">appon@wlink.com.np</a> Web: <a href="http://www.appon.org">www.appon.org</a>	
<b>FOR EXHIBITION MANAGEMENT USE ONLY</b>			
<b>CUSTOMER NO:</b>		<b>STALL NO. ASSIGNED:</b>	
<b>ORDER NO:</b>		<b>STALL SIZE</b>	<b>Sq. Mt.</b>

**ENCL: Terms & Conditions and Rules & Regulations of this Application & License Agreement for Exhibition Participation.**