



The 10th International Exhibition & Conference On Laboratory Instrumentation, Equipment, Automation and Services

June 8 - 10, 2010  
Kuala Lumpur Convention Centre  
Kuala Lumpur, Malaysia

Please complete section 1 & 2 and return copy to:

**FACON EXHIBITIONS SDN BHD - 132551T**

No. 10B, Jalan Desa Jaya  
Taman Desa  
58100 Kuala Lumpur, Malaysia

TEL : +60-3-7981 8766  
FAX : +60-3-7981 8771  
EMAIL : sales@faconex.com

**CONTRACT FOR PARTICIPATION**

**1. APPLICATION FOR SPACE (Deadline: March 15, 2010)**

Name Of Company			
Address			
Contact Person	Designation		
Telephone	Mobile Phone No.		
Fax	Email		

We require:	BOOTH / LOT NO.	TOTAL AMOUNT
<input type="checkbox"/> Equipped booth of ( ) m <sup>2</sup> at RM990.00 per m <sup>2</sup> (min. 9m <sup>2</sup> )		RM
<input type="checkbox"/> Bare space of ( ) m <sup>2</sup> at RM900.00 per m <sup>2</sup> (min. 18m <sup>2</sup> )		RM

\* **Equipped booth comprises:** 1 desk, 2 chairs, 2 fluorescent lights, 1 no. of 13amps outlet, carpeting, partitions, fascia board with organization's name and booth number.

\* **Bare space:** Nothing will be provided. It is Exhibitors' responsibility to carpet the floor area and put up an acceptable booth presentation. A copy of the design must be submitted to the Organizer for approval before construction can commence. Refundable performance bond of Rm2,000.00 per 9m<sup>2</sup> area is required.

**2. CONTRACT OF ACCEPTANCE**

We accept the TERMS OF CONTRACT (please refer to back page) for participation and shall be sending you the required payment, 30% deposit / full payment amount to RM \_\_\_\_\_ upon receipt of the invoice.

\* **Note : All payment to be made in favor of "FACON EXHIBITIONS SDN BHD"**

\_\_\_\_\_ **Date** \_\_\_\_\_ **Signature & Company Stamp**

**3. FOR OFFICIAL USE ONLY**

We hereby confirmed our acceptance of your participation in our above exhibition.

Equipped Booth / Bare Space allocated: \_\_\_\_\_ Total Size : \_\_\_\_\_ m<sup>2</sup>

**INVOICE DETAILS**

30% Deposit Invoice No.: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: RM \_\_\_\_\_  
70% Balance Payment Invoice No.: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: RM \_\_\_\_\_

\_\_\_\_\_ **Date** \_\_\_\_\_ **for FACON Exhibitions Sdn Bhd**