

REGISTRATION FORM FOR EXHIBITORS

NAME:

COMPANY NAME:

TITLE:

LOCATION AND NUMBER:

Functions in the company:

TAX number:

PHONE NUMBER:

MOBILE PHONE:

E-MAIL:

We would like to participate as an exhibitor with the package: (encircle)

A)"S"PACKAGE

B)"M"PACKAGE

C)"L"PACKAGE

Notes:

By signing this registration form we confirm that we will be in the period 1.3.2012 to 2.3.2012 part in the conference as an exhibitor RISK2012.

Place and date: Signature :.....