



Business Company: ABF, a.s.
Registered office: Beranových 667,
199 00, Prague, Czech Republic

Workplace, mailing address: Dálnická 12, 170 00, Prague, Czech Republic
Company Registration No.: 63080575, Tax Id. No.: CZ63080575
Registered by Municipal Court in Prague, Section B, File no. 3309
Bank Details: Expobank CZ a.s., Account No. 5085320021/4000
IBAN: CZ724000000005085320021, SWIFT: EXPNCZPP
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Co-exhibitor application

FOR CARAVAN

PVA EXPO PRAGUE, 26–28 November 2021

Deadline for submission of orders is 29 October 2021

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Exhibitor (Company name): _____

We declare that the following firms (our Co-exhibitors) will be presented within the framework of our exposition.

For each of them we will pay the Registration Fee amounting to **EUR 250** (in the case of 1 to 4 co-exhibitors)

EUR 136 (in the case of 5 to 8 co-exhibitors)

EUR 91 (in the case of 9 and more co-exhibitors)

Number of co-exhibiting firms (in the case of a larger number please fill in more forms no. 2)

1st Co-exhibitor

Company name _____ **Reg. No.** _____
Registered office* - street _____ **Tax ID. No.** _____
Town _____ **Postal Code** _____ **Country** _____
Contact person _____ **Position** _____
Tel./mobil _____ **E-mail** _____
Internet www. _____

2nd Co-exhibitor

Company name _____ **Reg. No.** _____
Registered office* - street _____ **Tax ID. No.** _____
Town _____ **Postal Code** _____ **Country** _____
Contact person _____ **Position** _____
Tel./mobil _____ **E-mail** _____
Internet www. _____

3rd Co-exhibitor

Company name _____ **Reg. No.** _____
Registered office* - street _____ **Tax ID. No.** _____
Town _____ **Postal Code** _____ **Country** _____
Contact person _____ **Position** _____
Tel./mobil _____ **E-mail** _____
Internet www. _____

4th Co-exhibitor

Company name _____ **Reg. No.** _____
Registered office* - street _____ **Tax ID. No.** _____
Town _____ **Postal Code** _____ **Country** _____
Contact person _____ **Position** _____
Tel./mobil _____ **E-mail** _____
Internet www. _____

* For natural persons (individuals) please state the place of business.

All prices are without VAT.

I hereby confirm that I read the Business Terms and Conditions of ABF, a.s., which are an integral part of this application form, and that I understand them and agree with them. I take into account that this is a framework agreement which will be realized in steps, based on further orders made in writing or via e-mail. If the orders are issued by a third party, the original is always required.

for ABF, a.s.

date, signature of exhibitor, stamp /representative of the exhibitor