

# REGISTRATION FORM for Exhibitors and Co-exhibitors

Information on prices can be found in the conditions of participation, available at [www.pest-protect.eu](http://www.pest-protect.eu)

## 1. Company details of the exhibitor

<input type="text"/>	<input type="text"/>	
Name of the exhibitor + company name (e.g. GmbH, BV, LLC, AG, s.r.l.)	Exhibitor ID (to be filled in by the organizer)	
<input type="text"/>		
Street, No		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Post code	City	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone (central)	E-Mail	Web address

## 2. Contact person for trade fair organisation

Mrs       Mr       divers

Correspondence in       German       English

<input type="text"/>	<input type="text"/>	<input type="text"/>
First name	Surname	Function
<input type="text"/>	<input type="text"/>	
E-Mail	Telephone	

All relevant documents and information about the company's appearance at PEST-PROTECT® will be sent to the contact person named here. An order authorization will be set up in the Shop for Exhibitor Services for the e-mail address (trade fair login) of the contact person named here in order to place orders for the company registered in the same data record and the stand listed there in the name and for the account of the company.

## 3. Stand registration

>>  Individual stand

Stand dimensions: Depth  m x Width  m      Stand size:  m<sup>2</sup>

Desired stand location (according to floor plan):

Please note that you must apply for a permit for your self-construction (**deadline 27.09.2024**). Further information can be found online at <https://www.pest-protect.eu/en/aussteller/standpreise.php>.



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>>  **System stand**

Stand dimensions: Depth  m x Width  m Stand size:  m<sup>2</sup>

with cabin (1 x 1 m, including in price)

without cabin (no price reduction!)

>> If you require additional furniture, you can order this from Messeaufbauten Klos using the "Rental furniture" order form. Please order further services such as electricity, water connections etc. in the Shop for Exhibitor Services at <https://www.serviceshop.messefrankfurt.com>. Orders can be placed from mid-May 2024.

>> **Stand/panel labelling**

Exhibitor name

Stand No. (to be filled in by the organiser)

>> **Location request - important for your placement!**

Please be sure to enter your placement preferences here in as much detail as possible (neighbourhood preference, thematic focus, etc.).

  
  
  
  

**Water connection desired** (separate order required in the Shop for Exhibitor Services)

yes

no

#### 4. Different billing address

>>  Corresponds to the company address under 1.

Name of the exhibitor + company name (e.g. GmbH, BV, LLC, AG, s.r.l)

Street, No or P.O. Box

Post Code

City

Country

Telephone

E-Mail for electronic invoicing

VAT ID no.

>> Exhibitors outside Germany who are commercially active as companies may, under certain conditions, receive their invoices without VAT, for which the VAT ID number must be stated; as a commercially active company based outside the EU, proof of entrepreneurial status must be submitted by the competent authority with this e-mail.

## 5. Registration for Co-exhibitors

We hereby apply for the admission of the company listed below, which will be represented with its own personnel and goods/services as a co-exhibitor on our stand.

### Co-exhibitor details

<input type="text"/>		<input type="text"/>
Name of the exhibitor + company name (e.g. GmbH, BV, LLC, AG, s.r.l)		Exhibitor-ID (to be filled in by organiser)
<input type="text"/>		
Street, No.		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Post code	City	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone (central)	E-Mail	Web address
<input type="text"/>		
VAT ID no.		

### Contact person

Mrs       Mr       Divers

Correspondence in

German       English

<input type="text"/>	<input type="text"/>	<input type="text"/>
First name	Surname	Function
<input type="text"/>	<input type="text"/>	
E-Mail	Telephone	

## 6. Signature

With this registration we accept the conditions of participation of PEST-PROTECT® 2024.

<input type="text"/>	<input type="text"/>	<input type="text"/>
Place and date	First name and surname	Company stamp and legally binding signature

## 7. Send back

Please return the completed form to us by e-mail: [contact@pest-protect.eu](mailto:contact@pest-protect.eu).

If you have any questions, please do not hesitate to contact us by telephone: T. +49 (0) 5451 5072446.