

**IMPORTANT**

All information should be filled in English and in BLOCK letters  
Company name may not be changed once application has been submitted  
Subletting of exhibition space is not allowed  
Courts in Mumbai shall have jurisdiction  
Minimum size of bare space booth allowed is 24 sqm and above.  
No modification allowed in shell scheme

**ISEE EXHIBITION APPLICATION/BOOKING FORM**

**A THE EXHIBITOR (Company information)**

|                |              |  |  |            |  |  |            |  |  |                  |             |  |  |
|----------------|--------------|--|--|------------|--|--|------------|--|--|------------------|-------------|--|--|
| COMPANY NAME   |              |  |  |            |  |  |            |  |  |                  |             |  |  |
| ADDRESS        |              |  |  |            |  |  |            |  |  |                  |             |  |  |
| CITY           |              |  |  |            |  |  |            |  |  |                  |             |  |  |
| STATE          |              |  |  |            |  |  |            |  |  |                  |             |  |  |
| COUNTRY        |              |  |  |            |  |  |            |  |  |                  | POSTAL CODE |  |  |
| TELEPHONE      | COUNTRY CODE |  |  | LOCAL CODE |  |  | NUMBER     |  |  | ALTERNATE NUMBER |             |  |  |
| CONTACT PERSON | SURNAME      |  |  |            |  |  | FIRST NAME |  |  |                  |             |  |  |
| DESIGNATION    |              |  |  |            |  |  |            |  |  |                  |             |  |  |
| EMAIL ID       |              |  |  |            |  |  |            |  |  |                  |             |  |  |
| MOBILE / CELL  | COUNTRY CODE |  |  | LOCAL CODE |  |  | NUMBER     |  |  | ALTERNATE NUMBER |             |  |  |

**B CORRESPONDENCE ADDRESS (if different from above)**

|                               |              |   |  |            |  |  |            |  |  |                  |             |  |  |
|-------------------------------|--------------|---|--|------------|--|--|------------|--|--|------------------|-------------|--|--|
| COMPANY NAME                  |              |   |  |            |  |  |            |  |  |                  |             |  |  |
| ADDRESS                       |              |   |  |            |  |  |            |  |  |                  |             |  |  |
| CITY                          |              |   |  |            |  |  |            |  |  |                  |             |  |  |
| STATE                         |              |   |  |            |  |  |            |  |  |                  |             |  |  |
| COUNTRY                       |              |   |  |            |  |  |            |  |  |                  | POSTAL CODE |  |  |
| TELEPHONE                     | COUNTRY CODE |   |  | LOCAL CODE |  |  | NUMBER     |  |  | ALTERNATE NUMBER |             |  |  |
| CONTACT PERSON                | SURNAME      |   |  |            |  |  | FIRST NAME |  |  |                  |             |  |  |
| RELATIONSHIP WITH EXHIBITOR   |              |   |  |            |  |  |            |  |  |                  |             |  |  |
| EMAIL ID                      |              |   |  |            |  |  |            |  |  |                  |             |  |  |
| MOBILE / CELL                 | COUNTRY CODE |   |  | LOCAL CODE |  |  | NUMBER     |  |  | ALTERNATE NUMBER |             |  |  |
| INVOICE ADDRESS (PLEASE TICK) | A            | B |  |            |  |  |            |  |  |                  |             |  |  |

**C STALL CHARGES, FEES & DEPOSITS**

|                                |                                |  |  |     |  |  |  |  |  |       |  |  |  |
|--------------------------------|--------------------------------|--|--|-----|--|--|--|--|--|-------|--|--|--|
| BOOTH NUMBER                   |                                |  |  | SQM |  |  | BARE                                   |  |  | SHELL |  |  |  |
| PARTICIPATION FEES             | Company GST Number (Mandatory) |  |  |     |  |  |  |  |  |       |  |  |  |
| CURRENCY                       |                                |  |  |     |  |  |  |  |  |       |  |  |  |
| C.1 FEES (IN FIGURES)          |                                |  |  |     |  |  | C.2 GST @ 18% (as applicable on date)  |  |  |       |  |  |  |
| C.3 TOTAL C1 + C2 (IN FIGURES) |                                |  |  |     |  |  |  |  |  |       |  |  |  |
| C.3 TOTAL C1 + C2 (IN WORDS)   |                                |  |  |     |  |  |  |  |  |       |  |  |  |
| C4 PAYABLE ON BOOKING          |                                |  |  |     |  |  | C5 BALANCE PAYABLE BY AUGUST 1st, 2024 |  |  |       |  |  |  |

| SHELL PACKAGE | Particular         | Qty                | Storage Space | Information Counter | Round Table | Chairs | Standard Long Arm Spotlights | Power Socket (5 AMP) | Waste Bin | Fascia Board with Company name | Wall to Wall Carpet | Booth Cleaning | BARE PACKAGE |
|---------------|--------------------|--------------------|---------------|---------------------|-------------|--------|------------------------------|----------------------|-----------|--------------------------------|---------------------|----------------|--------------|
|               |                    | Shell Scheme Booth | 12            | -                   | 1           | 1      | 5                            | 6                    | 1         | 1                              | 1                   | Y              | Y            |
|               | Shell Scheme Booth | 15                 | -             | 1                   | 1           | 5      | 6                            | 1                    | 1         | 1                              | Y                   | Y              |              |
|               | Shell Scheme Booth | 16                 | -             | 1                   | 1           | 5      | 6                            | 2                    | 1         | 2                              | Y                   | Y              |              |
|               | Shell Scheme Booth | 18                 | -             | 1                   | 1           | 5      | 6                            | 2                    | 1         | 2                              | Y                   | Y              |              |
|               | Shell Scheme Booth | 20                 | -             | 1                   | 1           | 5      | 7                            | 2                    | 1         | 2                              | Y                   | Y              |              |

**E ATTACHMENTS CHECKLIST (please tick applicable)**

|                                      |   |       |                                   |    |                              |    |                  |
|--------------------------------------|---|-------|-----------------------------------|----|------------------------------|----|------------------|
| D1                                   | Signed floor plan indicating booth                                      | D2    | Copy of Business Regn Certificate | D3 | Copy of Tax Regn Certificate | D4 | Advance enclosed |
| D6                                   | Payment details   |       |                                   |    |                              |    |                  |
| D5                                   | We enclose cheque / draft number  | Dated |                                   |    |                              |    | Drawn on         |
| D6                                   | We have transferred the amount and attach herewith the transfer details |       |                                   |    |                              |    |                  |
| Authorised Signatory Name            |   |       |                                   |    |                              |    |                  |
| Authorised Signature & Company Stamp |   |       |                                   |    | Signing Date                 |    |                  |

|                |                        |
|----------------|------------------------|
| Account Name   | ISEEVENTUS PVT. LTD.   |
| Account Number | 923020058328138        |
| Bank\          | Axis Bank Ltd.         |
| Branch         | Kanjurmarg (E), Mumbai |
| IFSC Code      | UTIB0004166            |
| SWIFT Code     | AXISINBB404            |
| GSTIN          | 27AAHCT3901D1ZM        |
| SAC CODE       | 998596                 |

Please complete and return this booking form (consisting of two pages) to the address mentioned below. The form must be signed by an authorised signatory of the company and the seal of the company must be affixed. Please make sure to keep one copy of the Contract for your files.

Organised by  
**ISEEVENTUS®** |   
**GET IN TOUCH**  
Priyanka Choudhuri +91 9920413001 | priyanka@iseeventus.net  
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+91 9930504733

Regd. Office: **ISEEVENTUS PVT. LTD.** (CIN: U74999MH2019PTC327055)  
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