Exhibition Expression of Interest Form

Exhibitor Information

Organization/Company

|  |  |
| --- | --- |
| Organization/Company: |  |
| Address: |  |
| City: |  |
| Country: |  |
| Postal Code: |  |
| Email: |  |
| Telephone: |  |
| Line ID (if available): |  |

Contact Person

|  |  |
| --- | --- |
| Full name: |  |
| Email: |  |
| Telephone: |  |

On-site Representative (s)

|  |  |
| --- | --- |
| 1. Full Name: |  |
| 2. Full Name: |  |

Booth information

|  |  |
| --- | --- |
| Number of booth(s):  40,000 per booth |  |
| Booth name: |  |
| Please provide a brief description of products or services you will be exhibiting: | |
|  | |
| Additional requirements: | |
| ⭘ 50” LED TV for 2,500 THB/unit/day  ⭘ additional electricity | |

Booth Specification and Exhibition Fee

The exhibition fee for 1 booth package is 40,000 THB and includes:

- 1 shell scheme aluminium-framed booth (width 3m x depth 2m x height 2.5m)

- 1 exhibitor’s name board

- 1 reception table with 2 chairs

- 1 electric outlet (220V AC, 5A)

- 1 dustbin

- 4-day food tickets for 2 persons (lunch and coffee breaks)

- Conference admission for 2 persons (additional attendees will be subject to a registration fee)

Additional items can be provided upon request with additional costs:

- 50” LED TV for 2,500 THB/day

- additional electricity

Exhibition Terms & Conditions

* The Conference organizers reserve the right to assign booth locations.
* Exhibitors may distribute promotional materials within their designated booth area.
* The conference organizers are not responsible for any loss, damage, or theft of exhibitor materials. Exhibitors are encouraged to carry insurance covering their exhibit materials and liabilities.
* Exhibitors must comply with local laws and regulations.
* Any violation of the terms and conditions may result in the removal of the exhibitor from the conference without a refund.

Payment Policies

* Payment can be made via credit card or bank transfer.
* All outstanding fees must be settled in full upon receiving confirmation from the conference organizers or by 2 February 2024, which ever comes earlier.
* The conference reserves the right to cancel the registration if the payment is not received by this date.
* Exhibitors are responsible for any applicable taxes and/or bank charges.
* NO REFUND will be issued upon cancellation.

For any inquiries or assistance, please contact: smakamas@hotmail.com

Payment Information

⭘ Bank Transfer

|  |  |
| --- | --- |
| Bank Name: |  |
| Account Name: |  |
| Payment Amount: |  |

⭘ Credit card:

|  |  |
| --- | --- |
| Card Type: ⭘ Visa ⭘ Master card ⭘ American Express | |
| Cardholder Name: |  |
| Card Number: |  |
| Expiration Date: |  |
| Payment Amount: |  |

Billing Address

|  |  |
| --- | --- |
| Address |  |
| City |  |
| Country |  |
| Postal Code |  |

For further inquiries regarding your payment, please contact: jitraporn.p@ku.th

*By submitting this form, the exhibitor agrees to the terms & conditions states herein.*

|  |  |
| --- | --- |
| Signature: |  |
| Date: |  |