

LIMBLESS ASSOCIATION

Amputee Track & Information Day

(Donington Park, Monday 20th September 2004)

EXHIBITOR APPLICATION FORM

YOUR DETAILS

Company/organisation name: _____
Contact Name: _____
Address: _____

Post Code: _____
Telephone (Land line): (_____) _____
Telephone (Mobile): _____
Fax: (_____) _____
Email: _____
Website: _____
Names of attendees 1: _____
2: _____
3: _____

STAND SELECTION

Size: 6m x 5m
 5m x 4m
 5m x 3m
 3m x 3m
 3m x 3m (Charity rate)

Preferred stand number (please refer to next page) _____

Do you have any specific requirements (equipment, access etc.)? _____

ABOUT YOUR STAND

Which of the following categories is applicable to your company/organisation?

Adaptive technology Vehicle conversion
Advisory Governmental / regulatory
Clothing Charity
Prosthetic industry
Other (please specify _____)

What product(s) and/or service(s) will you be exhibiting? _____

Are you interested in representing your area of expertise at the planned discussion forums (presentation and/or question & answers session)? Yes / No

PAYMENT

I enclose a deposit payment of £_____. Balance to be paid in full by 1st August 2004.

(Please make payment to 'Limbless Association')

Signed: _____ Print Name: _____ Date: _____

PUBLICITY

A list of exhibitors, detailing products and services, will be included on the www.disabledmotorsport.co.uk website. Exhibitor's information may be used to promote/publicise the event and included in information packs for attendees. If you do **NOT** want your details to be used, please tick this box

The more information we receive on your products/services, the more chance there is that the media will use it. Please include any relevant brochures, leaflets with your application.

LIMBLESS ASSOCIATION

Amputee Track & Information Day - Floorplan

Contact Scott Richardson on 0208 788 1777 Ext. 21 to book your space



THE PADDOCK SUITE

Contact information: Phone 01332 810048 - Fax 01332 811647

Circuit Viewing Area

