## (4) Exhibitor badge Application Form

Please return this form by Aug. 30th 2017

## 1. Applicant

| Company        |         |          |  |
|----------------|---------|----------|--|
| Company Detail | Address |          |  |
|                | Country | Tel      |  |
|                |         | Fax      |  |
| Contact        | Name    | E-mail   |  |
|                | Dept    | Position |  |

## Exhibitor's passes are to be distributed during the preparation period

Please return this application form to:

| No | Name | Job Title | Department |
|----|------|-----------|------------|
| 1  |      |           |            |
| 2  |      |           |            |
| 3  |      |           |            |
| 4  |      |           |            |
| 5  |      |           |            |
| 6  |      |           |            |
| 7  |      |           |            |
| 8  |      |           |            |
| 9  |      |           |            |

Exhibitor:

| • •  |                       |  |
|--|-----------------------|--|
| ADPEX JOINT STOCK COMPANY                      | Booth No:             |  |
|  |                       |  |
| G3 – No. 6 Phung Khac Khoan – Dist. 1 – HCMC   | Person In-Charge :    |  |
| Tel: (+84 8) 38239052  * Fax: (+84 8) 38239053 |                       |  |
| Hanoi Office                                   | Date:                 |  |
| R. 405, 20 Ly Thuong Kiet, Hoan Kiem, Hanoi    |                       |  |
| Tel: (+84 4) 35162063 * Fax: (+84 4) 35162065  | Signature and stamp : |  |
| Email: pharmed@pharmed.vn                      |                       |  |