Booking form for NOK 2028

NOK2028
NORDIC CONGRESS OF OPHTHALMOLOGY

7-9 June 2028 Odense, Denmark

Invoice address - please use block letters

Booking form for Sponsor items:

Name of company: _____

Contact person: _____

Address: _____

Address: _____ ZIP Code: _____

City: _____ Phone: _____

Country: _____

E-mail: _____ VAT no: _____

We would like to book the following Sponsor items:

Items: _____ DKK: _____

Stand no: _____ Stand size: _____ DKK: _____

Vendor (price 400 DKK): DKK: _____

For the value of: _____ **DKK:** _____

Terms of Payment: A deposit of 50% of the total sponsorship fee due will be invoiced once this signed Sponsorship Booking Form has been received. The second payment of 50% of the total sponsorship fee will be invoiced 3 months before the Congress.

Cancellation Policy: Cancellations must be received in writing. A cancellation charge of 50% of the total sponsorship fees will apply to cancellations received between 9 months and 3 months prior to the meeting. For cancellations received later than 3 months prior to the meeting a 100% charge of the application will be applied. Prices will be added Danish VAT.

Signature of this form implies compliance with the rules stated in this document.

Signature: _____ Date: _____

This application is legally binding
Return to Attn: NOK 2028, Peder Andersen, exhibition@discongress.com