|  |  |
| --- | --- |
| **Company name** |  |
| Physical Address(including Post Code, no P.O. Box-Address) |  |
| **Fax Number** |  |
| **Phone Number** |  |
| **eMail** |  |
| **Please check ☑** | **□ Exhibitor, stand no: \_\_\_\_\_\_\_\_\_\_ □ visitor** |

Name and Place of Exhibition

Formnext 2019 in Frankfurt

Date of Exhibition

19.-22.11.2019

Time period of invitation (if it differs to exhibition date)

Reason for different time period of invitation

## Individuals to be invited. If necessary use another form.

We confirm that we have noted the information sheet and we agree to the terms therein

|  |  |
| --- | --- |
| Name (Latin alphabet, as written in passport) |  |
| Date of birth |  |
| Passport number |  |
| Company and function in company  |  |

In you’ll not apply at the consular section of the German Embassy, please provide address, fax and telephone number of the desired consulate.

|  |  |
| --- | --- |
| Name (Latin alphabet, as written in Passport) |  |
| Date of birth |  |
| Passport number |  |
| Company and function in company |  |

|  |  |
| --- | --- |
| Name (Latin alphabet, as written in passport) |  |
| Date of birth |  |
| Passport number |  |
| Company and function in company |  |

|  |  |
| --- | --- |
| Name (Latin alphabet, as written in passport) |  |
| Date of birth |  |
| Passport number |  |
| Company and function in company |  |

Please use a separate sheet of paper for longer lists in group invitations.