Exhibition Application Form

Please fill out the below application form, and send it back to the secretariat.

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| ■ IWUMD 2022 Local Secretariat  Tel: +82-42-472-7460 / Fax: +82-42-472-7459 / E-mail: iwumd2020@iwumd2020.org |

1. Company Information

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name |  | | |
| Website |  | | |
| Address |  | | |
| City |  | Postal code |  |
| Country |  | | |
| Telephone |  | Mobile |  |
| E-mail |  | Fax |  |
| Contact Person Name |  | | |
| Job Title |  | Department |  |

1. Application

|  |  |  |
| --- | --- | --- |
| Category | QNTY | Total Amount |
| Shell Scheme Package (USD 2,000) | booth(s) | USD |
| Total Amount: USD | | |

1. Payment Method (Wire Transfer Only)

|  |  |
| --- | --- |
| Account Holder | Genicom Co., LTD IWUMD 2020 |
| Account Number | 741-910024-06304 |
| Bank Name | KEB HANA BANK |
| SWIFT Code | KOEXKRSE |
| Bank Address | 35, EULJI-RO, JUNG-GU, SEOUL, SOUTH KOREA |

Name of Applicant: Date:

Signature