





## **2016 EXPO APPLICATION**

Address:	Billing address (if different):
City:	
State/Province:	
Zip Code:	
Country:	
Signee Contact Info	On-Site Contact Info (if different)
Contact person:	Name:
Contact phone number:	Contact number:
E-mail:	E-mail:
Company /Brand to be communicated:	
Website:	
EXPO SPACE DETAILS / NEEDS	

BOOTH SPACE*	All booths include
<ul> <li>10′ x 10′ \$2,400         Comes with 1 table and 2 chairs         10′ x 20′ \$3,600         Comes with 2 tables and 4 chairs         20′ x 20′ \$5,600         Comes with 2 tables and 4 chairs         Custom booth space: Price upon request     </li> </ul> Extra table and/or chair rental available upon request.	Tent Access to electricity Overnight security throughout expo (outside opening hours; please note: NO individual security provided)  Products /Services to be exhibited: Please list all product categories that you are planning on selling /exhibiting.

## **ADDITIONAL COMMENTS**

Please add any relevant information regarding your booth not covered above.







## **PAYMENT**

Payment can be made via wire transfer or Paypal:		
	Wire Transfer: BANK: BBVA - BANCOMER	Amount \$:
	SWIFT: BCMRMXMM	
	BENEFICARY: AS DEPORTE SA DE CV	
	CURRENCY: USD	
	ACCOUNT NUMBER: 0163148726	
CLABE ACCOUNT: 01 21 80 00 16 31 48 72 68 (if necessary)		
	Paypal:	Amount \$:
Ш	Payment via paypal will have a 6% additional f	
This is my application for expo space at the 2016 ITU World Triathlon Championships Cozumel. I confirm that I have read, understood and agreed to the attached Exhibitor Letter. Upon acceptance of this application, I agree to pay the total cost shown above. Booth space contracted is subject to cancellation until payment is received in full. Failure to make payment will automatically result in loss of boothspace.		
Please return the signed application form to Andrea Galván at agalvan@asdeporte.com		
Date:		
Print	name:	
<u>.</u> .		
Signa	ture:	
		<del></del>