

## BOOTH RESERVATION FORM

Please return all pages via e-mail to [sponsorSIDO@mzevents.it](mailto:sponsorSIDO@mzevents.it)

Exhibiting Company: _____
<b>Invoicing Data:</b>
Company Name _____
Address _____
ZIP code/Post Code _____ City _____
VAT Identification Number _____
Main Contact Person: _____
Phone _____ e-mail _____
<b>COMPANY NAME TO BE DISPLAYED</b> _____
<b>BOOTH CHOICE</b> (please, indicate 3 options in order of preference) - € 440 per sqm.
<input type="checkbox"/> 6 sqm booth      € 2,640.00 + vat 22% (if applicable)
<input type="checkbox"/> 9 sqm booth      € 3,960.00 + vat 22% (if applicable)
<input type="checkbox"/> 12 sqm booth     € 5,280.00 + vat 22% (if applicable)
<input type="checkbox"/> 15 sqm booth     € 6,600.00 + vat 22% (if applicable)
1) _____ 2) _____ 3) _____
<input type="checkbox"/> <b>I need a pre-equipped booth</b> (included: laminated wall panels (2.5 m in height), exhibitor's name sign on front of booth, 1 table, 3 chairs, 1 bin, 1 coat hanger, 1 kilowatt of power, 1 electricity 1000watt rack with multiple plugs, 2 LED 50 watts spotlights).
<input type="checkbox"/> <b>I will not use a pre-equipped booth.</b> My booth will be equipped by:
Company name: _____
E-mail _____

## TERMS OF PAYMENT

**SIDO will issue the total invoice to be fully paid upon signature of this form.**

Please select the preferred type of payment:

**Card Number:** \_\_\_\_\_ (VISA or MASTERCARD – American Express will not be accepted)

Expiry Date (Month/Year): \_\_\_\_/\_\_\_\_ CVV: \_\_\_\_\_

Card holder: \_\_\_\_\_

Name and surname: \_\_\_\_\_

**Bank Transfer to SIDO - Banca Sella**

**IBAN:** IT35 K032 6801 6030 5290 2993 231

**SWIFT code:** SELBIT2BXXX

Please send a copy of the bank transfer to *sponsorSIDO@mzevents.it* and *sido@sido.it*

### CANCELLATION POLICY

The Exhibiting Company must inform *sponsorSIDO@mzevents.it* any request of reimbursement for the cancellation of any exhibition space.

- For cancellations received **by June 20, 2024**, the booth cost will be fully refunded.
- **From June 21, 2024:** 50% of the booth cost will be due to SIDO.
- **From September 2, 2024:** 100% of the booth cost will be due to SIDO. No refund will be provided.

Date \_\_\_\_\_

Exhibitor's Legal Representative Signature and Stamp \_\_\_\_\_

**Please return VIA E-MAIL to [sponsorSIDO@mzevents.it](mailto:sponsorSIDO@mzevents.it)**



## LETTER OF INDEMNITY

With this letter, we declare that SIDO, MZ EVENTS srl and Fortezza da Basso are not liable for any damage or theft that could occur to objects and/or our staff during the Congress or transfer to/from the Congress. The liability rests entirely with the undersigned company.

### **Conformity with EC Legislation**

Act no.7/ 2001, governing the trade fair sector, establishes that it is compulsory for all goods on display or for sale to be in conformity with CE marking requirements. In this regard, it is worth recalling the “*Agreements of Mutual Recognition in Relation to Conformity Assessment*” that have been signed between the EU and several non-EU States, establishing that markings authorized in those States are equivalent to CE markings. The concerning States are: Switzerland, Australia, New Zealand, Japan, United States of America and Canada.

DATE \_\_\_\_\_

Signature of a Legal Representative \_\_\_\_\_

Please return VIA E-MAIL to [sponsorSIDO@mzevents.it](mailto:sponsorSIDO@mzevents.it)

## ALL RISKS INSURANCE POLICY

**I declare to have an All-Risks Insurance Policy (please find it attached)**

Mandatory requirements:

the first page of the policy with the company header, insured limits and the extension for participation in trade shows and/or conferences, or statement from the company's insurance company/broker regarding the protections from the same.

OR

**I declare to not have any Insurance All-Risks Policy and ask to buy it at the cost of € 100,00 + VAT (if applicable)**

The coverage shall include the risks (theft - fire - damage - breakage) of the goods/technologies/samples etc. during the entire stay in the Firenze Fiera S.p.a. premises.

All personal effects are excluded from insurance protection.

By adhering to the insurance policy, Firenze Fiera S.p.a. shall protect all Organizers and exhibiting companies by including them in its own general policy, which provides for a maximum coverage of approximately 5,000,000 euros to cover Civil Liability for damages due to accidents/incidents caused to third parties or in any case deriving from the activity carried out during trade fair and congress events.

Please note that the damages deriving from vehicles circulation are excluded.

Faithfully,

DATE \_\_\_\_\_

Signature of a Legal Representative \_\_\_\_\_

Please return VIA E-MAIL to [sponsorSIDO@mzevents.it](mailto:sponsorSIDO@mzevents.it)

## STATEMENT ON SALES

I hereby declare that I will **NOT** sell our and/or third parties' goods at the above event

**OR**

I hereby declare that sales of goods at our stand (including delivery and payment collection) **WILL** be carried out in full compliance with all taxes, customs and product certification provisions.

Selling activities during the exhibition will be performed directly by us:

Exhibitor \_\_\_\_\_

(VAT N. \_\_\_\_\_)

Legal Representative \_\_\_\_\_

**Please attach a copy of the Legal Representative's ID.**

SIDO and MZ Events are fully indemnified from any possible liability in this respect

Faithfully,

DATE \_\_\_\_\_

Signature of a Legal Representative \_\_\_\_\_

Please return VIA E-MAIL to [sponsorSIDO@mzevents.it](mailto:sponsorSIDO@mzevents.it)

## SPONSORSHIP AGREEMENT

### BETWEEN

**SIDO - Società Italiana di Ortodonzia** - Via Pietro Gaggia, 1 - 21139 Milano, Tax Identification Number 02497080107 and VAT Registration Number 09912490159, hereinafter the **"Provider"**

### AND

the **"Sponsor"** - the data for which are shown on page 1 of this document

### WHEREAS:

- A. The Provider carries out professional training programmes in the healthcare sector, availing itself of the collaboration of scientific consultants who are experts in the topics covered;
- B. The Exhibitor/Sponsor is interested in sponsoring the professional training programme 55<sup>th</sup> SIDO International Congress- "BUILDING BRIDGES FOR THE FUTURE" to be held in Firenze, on 17-19 October 2024, promoted by the Provider;
- C. The Parties intend to regulate the relations deriving from this agreement in accordance with the provisions on sponsorship of the State-Regions Agreement of 2 February 2017.

### Art. 1 - Object of the Agreement

The Sponsor undertakes to contribute financially to the realisation of the Project, in exchange for the visibility of its company logo and of the exhibition stands as indicated on page 1 of this document.

### Art. 2 – Provider 's Duties

The Provider will carry out the Project, in full autonomy, with the scientific support of experts in the covered topics, and MZ EVENTS srl as the Organizing Partner, for which it will request ECM accreditation.

### Art. 3- Payment

For the specified services, the Sponsor will pay the Provider the sum indicated on page 1 of this document. Any additional charges will be settled at the end, upon receipt of the invoice.

### Art. 4 – Rights and Further Duties of the Exhibitor/Sponsor

In exchange of the Contribution, the Sponsor may carry out commercial promotion activities within the limits indicated in the State-Regions Agreement of February 2, 2017 and in the ECM regulations in force.

### Art. 5 – Use of the Sponsor's Name and Brand

The Provider will use the Sponsor's name and brand exclusively for the purposes set forth in this Agreement and for its duration, agreeing to cease all use upon its termination.

The parties mutually acknowledge and recognise that each and every clause and obligation of this Agreement has been prepared, negotiated and accepted by each of the parties.

Signed:

**SIDO**

**EXHIBITOR**