

# FORM

# 8

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Country and Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_

Total Cost: \_\_\_\_\_

Signature

Date Of Submitting Form



As a services to Exhibitors, the Organizer will invite your customers who are key buyers / specifiers of the industry to attend the exhibition as a VIP on your behalf.

PLEASE TYPE, IN BLOCK CAPITALS, THE VIPs WHOM YOU WISH TO INVITE. HAND WRITTEN LIST WILL NOT BE ACCEPTED.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

\*\*\*\*\*

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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If space is insufficient, please attach a separate sheet. (Maximum 5 VIPs)

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 Jakarta 11220  
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 6334581, 6345002  
Facsimile  
 + 62 21 6340140, 6342113  
 63869154  
E-mail  
 info@kristamedia.com  
Website  
 www.kristamedia.com

**PLEASE FAX BACK  
 THIS FORM TO  
 +62 21 6340140,  
 6342113, 63869154**

**ATTN  
 Ms.Valans/  
 Ms.Pudji**  
**PLEASE TYPE NEATLY  
 MOHON DI KETIK  
 THANK YOU.**  
 valans@kristamedia.com  
 pudji@kristamedia.com