

APPLICATION FORM FOR TRADE FAIRS

CÓDIGO: FORCML15

VERSIÓN: 7

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Please fill all spaces in capital letters

	' '				
Date D M Y 2013 Event E	XPOARTESANÍAS 2013	National		Received	^A 2013 No.
Name of Artisan/ or representative		Passport No		Age	Sex M _ F _
Name of workshop or Company				·	
Address	Telephone	Fax		Mobile:	
Mail Address		City		Country	
E- mail		Web page			
List of products you desire to exhibit and comercialize:					
OFNEDAL INFORMATION					
GENERAL INFORMATION	0				
Basic raw material	Secondary raw materials Machinery / Tools used				
·	Years of experience Machinery / Tools used				
•	Years of experience		Amount		
	92 93 94 95 96 97 98 99 2000 01 02 03 0	4 05 06 07 08 09 10 11 12	First time		
In case of disponibility how many booths are you interested	d in renting?				
	I have read and accept the conditions and terr	ns contained in the participat	on manual		
				S	ignature
					D M Y
FOR EXCLUSIVE USE OF ARTESANIAS DE COLO	DMBIA				
Área Sut	nárea Design	Committee:			