



Exhibition & Sponsorship Application Form

Combined 33rd SICOT & 17th PAOA Orthopaedic World Conference
28-30 November 2012



SPONSORSHIP APPLICATION FORM

Combined 33rd SICOT & 17th PAOA Orthopaedic World Conference

This agreement is to acknowledge the intention of:

Company: _____

Contact: _____

Title: _____

Address 1: _____

Address 2: _____

City and Province/State: _____

Postcode: _____ Country: _____

Tel.: _____ Fax: _____

E-mail (**mandatory**): _____

VAT No. (for EU companies): _____

Sponsorship/symposium or exhibition space requested: _____

Signature: _____

If you have any questions please contact Mrs. Lina Salvati

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