

A APPLICATION FORM send to info@oliocapitale.it

1. DATA FOR CONTRACT HEADING AND INVOICING

Company _____ VAT number / fiscal code _____
 Address _____ ZIP code _____
 City _____ Country _____
 Tel. _____ mob _____

2. EXHIBITOR'S DATA

Company _____ VAT number / fiscal code _____
 Address _____ ZIP code _____
 City _____ Country _____
 Tel. _____
 e-mail _____ www _____
 Contact person _____ Position _____
 tel. _____ mob. _____ e-mail _____

3. PRODUCTS DISPLAYED

1. Tick box as required: extra-virgin olive oil table olives services specialist press / media spices or dressings other

2. Product description: _____

4. REQUEST FOR EXHIBITION AREA

- REGISTRATION FEE** includes: listing in on-line catalogue and join in Marketplace oliocapitale.shop (E-commerce site) until March 2023, advertising taxes, exhibitor badges (max. 3 each booth), free subscription to 16th Olio Capitale Competition, On line meetings with buyers,
- SPACE ONLY** (minimum 36smq) **no** perimeter panels, **no** electrical plant. Subject to **booth project approval**.
- SHELL SCHEME BOOTH** 6 sqm (3mx2m) includes perimeter walls, carpeting, lighting, electrical socket, booth identification sign, closet 1mx1m, 3 chairs, 1 table.

A	REGISTRATION FEE	PRICE	TICK BOX	TOT A
1. Contract holder		€ 190,00	<input type="checkbox"/>	
2. For any additional co-exhibitor sharing booth with contract holder (1 exhibitor for any 6 sqm):		€ 120,00	N° <input type="text" value="1"/>	€ _____
B	TIPOLOGY	PRICE	AREA	TOT B
	space only* (minimum 36sqm)	€ 125,00 / sqm	sqm: _____	
	6 sqm shell scheme booth	€ 1.300,00 / per module	number of 6 sqm modules: _____	€ _____
	6 sqm shell scheme booth	€ 1.100,00 / per module	number of 6 sqm modules: _____	
C	ACCESSORIES	PREICE	QUANTITY	TOT C
	Lighted showcase	€ 180,00 / each	N° _____	€ _____
	Booth cleaning	€ 4,00 / sqm	sqm : _____	€ _____
TOTAL = A+B+C =			€ _____	+ VAT

NB: * Requests for naked space can be accepted only with booth project previous approval. Cost for electricity link up of exhibitor's certified electrical plant: € 40 + VAT. - Companies are kindly requested to send company profile or presentation brochure.

In accordance with D.lgs. 196/03, I authorize the Organizer to treat even electronically the data provided in this form for communications and commercial promotions concerning the activities of the Fair, statistical processing, analysis and market research, historical information archiving. You may cancel, your data at any time by sending an e-mail to: info@oliocapitale.it subject: cancel oil.

_____ Place and date

_____ Stamp and Signature



B DATA FOR ONLINE CATALOGUE and CO-EXHIBITORS REGISTRATION
email to info@oliocapitale.it

>> EXHIBITORS DATA (TYPE OR WRITE IN BLOCK CAPITAL LETTERS)

Company Name _____ VAT number / fiscal code _____
Address _____ n. _____ ZIP _____
City _____ Country _____
Tel. _____ mob _____
e-mail _____ www _____

>> EXTRA VIRGIN OLIVE OIL:

Production in liters _____ Number of labels on show: _____

Category of olive oil intensity: Light Medium Intense
Olive oil: Organic PDO Certified PGI Certified Flavored olive oils

Type of olive _____

>> TABLE OLIVE:

Type of table olive: _____

>> VINAGRE, SALT, SPICES, OTHER:

Additional notes:
CO-EXHIBITORS:

Fill in carefully with your co-exhibitors data for the online catalogue and insurance coverage
Companies present in the booth of the direct exhibitor with their own staff and products/services

>> CO-EXHIBITOR (TYPE OR WRITE IN BLOCK CAPITAL LETTERS)

Company Name _____ VAT number / fiscal code _____
Address _____ n. _____ ZIP _____
City _____ Country _____
Tel. _____ Mob _____
e-mail _____ www _____

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Type of olive _____

>> TABLE OLIVE:

Type of table olive: _____

>> VINAGRE, SALT, SPICES, OTHER:



>> CO-EXHIBITOR (TYPE OR WRITE IN BLOCK CAPITAL LETTERS)

Company Name _____ VAT number / fiscal code _____

Address _____ n. _____ ZIP _____

City _____ Country _____

Tel. _____ Fax _____

e-mail _____ www _____

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>> TABLE OLIVE:

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>> VINAGRE, SALT, SPICES, OTHER:

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>> TABLE OLIVE:

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>> VINAGRE, SALT, SPICES, OTHER:

The Organizer is not liable for errors or omissions in the Official Expo Catalogue.

I authorize the Organizer to treat my data in accordance with D.lgs. 196/03. You may cancel, your data at any time by sending an e-mail to: info@oliocapitale.it subject: cancel OLIO.

Luogo e data

Timbro e Firma



C EXHIBITORS COMPANY PROFILE for business meetings with buyers
 email to info@oliocapitale.it

FILL IN ALL FIELDS

For collective booths, please fill in this form for each company booking meetings.
 Meetings will be scheduled upon buyers requests. Agenda of meetings cannot be granted.
 Forms received after **15 APRIL 2022** will not be considered.

COMPANY NAME	_____		
ADDRESS	_____ n. _____		ZIP _____
CITY	_____ COUNTRY _____		
CONTRACT HOLDER (if collective participation)	_____		
CONTACT PERSON AND POSITION	_____	MOBILE	_____
LANGUAGES	<input type="checkbox"/> ITALIAN <input type="checkbox"/> ENGLISH <input type="checkbox"/> GERMAN <input type="checkbox"/> OTHER: _____		
TEL.	_____		
E-MAIL	_____	www	_____
FIELD OF ACTIVITY:	_____		
KIND OF PRODUCT:	1. OLIVE OIL: <input type="checkbox"/> ORGANIC <input type="checkbox"/> NOT ORGANIC <input type="checkbox"/> PDO CERTIFIED <input type="checkbox"/> PGI CERTIFIED <input type="checkbox"/> FLAVOURED		
	2. QUANTITY OF OLIVE OIL PRODUCED PER YEAR: _____ liters		
	3. AWARDS RECEIVED, IF ANY: _____		
	3. OTHER PRODUCTS: <input type="checkbox"/> OLIVES <input type="checkbox"/> IN OILS <input type="checkbox"/> VINAGRE <input type="checkbox"/> SALT <input type="checkbox"/> SPICES <input type="checkbox"/> OTHER: _____		
ALREADY EXPORTING IN FOREIGN MARKETS:	<input type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES:	- WHICH COUNTRIES: _____		
	- THOROUGH WICH DISTRIBUTION CHANNELS: _____		
	- FOREIGN MARKETS WHERE YOU HAVE EXCLUSIVE REPRESENTATIVES: _____		
HAVE YOU GOT CERTIFICATES NECESSARY TO EXPORT IN EXTRA EU MARKETS?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
WHICH FOREIGN <u>DISTRIBUTION CHANNELS</u> ARE YOU INTERESTED IN:	<input type="checkbox"/> IMPORTERS <input type="checkbox"/> DISTRIBUTORS <input type="checkbox"/> RETAILERS <input type="checkbox"/> MASS RETAILERS <input type="checkbox"/> HOTEL/RESTAURANTS		
WHICH <u>END CUSTOMERS</u> IS YOUR PRODUCT ADDRESSED TO:	<input type="checkbox"/> WHOLESALE <input type="checkbox"/> HOTEL, RESTAURANTS, CATERING (HO.RE.CA.) <input type="checkbox"/> RETAILERS, GOURMET SHOPS <input type="checkbox"/> INTERNET/MAIL <input type="checkbox"/> END CONSUMERS		
WHOLESALE PRICE OF YOUR EVO OIL IN CASE OF MORE LABELS INDICATE MINIMUM AND MAX PRICE:	FROM € _____/PER LITRE	TO € _____/PER LITRE	

_____ Place and date

_____ Stamp and Signature



Fill in and send this Form back to info@oliocapitale.it BEFORE 15 APRIL 2022

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