



EXHIBIT APPLICATION FORM

معرض الشارقة للطابع 2024

SHARJAH 2024 STAMP EXHIBITION



Fill in a separate form for each exhibit. Please print or type in block letters.
This Exhibit Application Form must be returned through the Commissioners
to reach the Commissioner General by 30 September 2024.

Email: uaephilately@gmail.com

Date: 20 - 24 November 2024

Venue: Mega Mall, Sharjah, United Arab Emirates

First Time Entry :Yes No

FIP IDENTITY NUMBER:

Tel

Fax

Email

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Surname	First Name
Pseudonym			Date of birth (for youth class only)	Telephone
Address				Email
				Fax

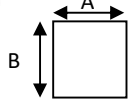
Title of this exhibit (in English)

Previous title

Short description of the exhibit (in English)

1) Introduction page included Yes No

2) Philatelic Literature Exhibit Information Form included (only applicable for Literature exhibits) Yes No

Exhibit class	Number of frames applied for	Dimensions of sheets (in cm)
		
		A= B=

The exhibit will be delivered <input type="checkbox"/> By Commissioner <input type="checkbox"/> By self (The exhibitor) <input type="checkbox"/> By Air cargo (Please specify)	PAST AWARDS RECEIVED								
	International (FIAP/FEPA) / World (FIP) Exhibitions	LG	G	LV	V	LS	S	SB	B
	National Exhibitions								

The undersigned (Exhibitor) hereby (1) agrees to accept all FIP Regulations (GREX, GREV, SREVS) and the individual regulations (IREX) applying to Sharjah 2024 (2) confirms that the exhibit is owned by me (GREX Article 11.2)

Date _____

Signature _____

Commissioner's declaration

Remarks _____

Date _____

Signature _____