



Write in BLOCK LETTERS, please. This form have to be sent to your National Commissioner by June 30, 2021

Your FIP Identify number (if known)  First time Entry (X)  Title (Mr, Mrs, Ms,Dr)

Exhibitor's given name  Family name

Pseudonym  Email  Phone

Full address

Country  Date of birth (DD/MM/YYYY) (Youth class only)

Title of exhibit (in English)

Previous Title (if exists)

Short description of the exhibit (in English)

Introduction page included (x)  Synopsis included (x)  Philatelic Literature Exhibit Information Form included (x)

Exhibition Class  Number of Frames  Sheet sizes (width x height)  x  cm

	Level	Year's	Exhibition name	LG	G	LV	V	LS	S	SB	B
Past awards received at last International exhibitions (FIP, FEPA, FIAP, FIAF)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
National Exhibitions	1'st	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	1'st	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

I hereby confirm (I) my acceptance of all relevant FIP regulations together with the special rules for the exhibition, and (II) confirms that the exhibit is owned by me. I give my consent (III) to information contained on this form being held digitally by the organisers of the exhibition.

Commissioner's declarations – Remarks:

Exhibitor's  
Signature

Comissioner's  
Signature

Date  
(DD/MM/YYYY)

Date  
(DD/MM/YYYY)

*Three copies of this form are required. 1<sup>st</sup> original - National Commissioner 2<sup>nd</sup> - Jury 3<sup>rd</sup> - Exhibitor*