

# ADVERTISEMENT BOOKING



International  
**HEALTH EXPO**  
& conferences

**LUDHIANA**  
22-25 August, 2009

**CHANDIGARH**  
05-08 February, 2010

## Advertiser's Profile:

Advertising Company's Name			
Contact Person's Name			Designation
Address			
City		Pin	
Country Code	Area Code	Phone	Fax
Mobile No.	E-mail	Website	

## Particulars of Advertisement :

Position	Indian INR	Foreign US\$
• Full Page (Black & white)	8,500/-	215
• Full Page (Coloured)	12,500/-	315
• Bookmark	20,000/-	500
• Inside Back Cover (Color)	25,000/-	625
• Inside front Cover (Colour)	30,000/-	750
• Back Cover	35,000/-	875

+ Service Tax

## Dimensions of the Directory

Page Area	: 130mm x 210 mm
Print Area	: 110mm x 190mm

## Material Required

Positive Films or in CD (Corel 11/ .jpg format) to the size of the Print Area

## Please Allocate us:

<input type="checkbox"/> Full page Coloured	<input type="checkbox"/> Full page Black & White	
<input type="checkbox"/> Book mark	<input type="checkbox"/> Inside Back Cover	
<input type="checkbox"/> Inside Front Cover	<input type="checkbox"/> Back Cover	<b>TOTAL</b> <input type="text"/>

We wish to advertise in Exhibitors Directory of IHEC \_\_\_\_\_ . We are enclosing Demand Draft No. \_\_\_\_\_

dated \_\_\_\_\_ drawn on \_\_\_\_\_ Bank for Rs. \_\_\_\_\_ in favour of **Paramount Exhibitors** payable at

**Chandigarh.** Bank Transfers in US\$ should be made in favour of **Paramount Exhibitors** A/c no. 30011092102, Swift code **SBININBB141** in the State Bank of

India, SSI Branch Mohali.

Name: \_\_\_\_\_

Signature with Seal: \_\_\_\_\_

Date: \_\_\_\_\_ Place : \_\_\_\_\_

Designation: \_\_\_\_\_

(To be accepted & Confirmed only by Company authorised signatory)

PLEASE MAINTAIN A COPY OF THIS FORM FOR YOUR RECORDS

Mailing Address :

Paramount Exhibitors, C-84, Industrial Area, Phase 7, Mohali (Chandigarh)-160055, India Ph: +91-172-4699301-2, 2274801-2, Fax: +91-172-4699303, 2274803