



EXHIBITOR/SPONSOR FORM

Fill the form and mail to: info@MDRproject.com by May 15, 2023 completed with payment in full.

Company Name:

Address:

Country: Website:

Product categories: (add categories for the check box)

- Food, Fashion Accessories, Home Decor, Other, Refrigerated, Frozen, Shelf Stable, Equipments

Requires special equipment/preparation No Yes (if yes specify)

Contact name:

Email: Mobile:

PLEASE SELECT YOUR PACKAGE

- Basic \$2000, Silver: \$5000, Gold: \$7500

Other packages available, including other MDR events.

Each participant commits to sending products at their own expense to the address that will be provided upon payment of the participation fee.

Yes, I confirm my participation to The MDR MED BAZAR in Philadelphia!

By signing and submitting this form, you accept the Terms and Conditions of Participation in this MDR Experience.

Data Protection: for organizational purposes only, by submitting this form you automatically consent to the use and passing on your personal data to our partners.

Terms and Conditions: as demonstrated by the COVID 19 pandemic, unforeseeable situations might occur from the Organizers side or your side.

Sign _____