SPECIALIZED WORLD STAMP EXHIBITION



Bucharest 16-19 April 2024

EXHIBIT APPLICATION FORM

Fill in a separate form for each exhibit. Please type or write in BLOCK letters.

This form must be returned through the Commissioners to reach the   
Commissioner General by October 16, 2023

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| FIP IDENTITY NUMBER: | | First Time Entry -  YES □ NO □ | | |
| Mr Mrs Miss  □ □ □ | Surname: | First Name: | | |
| Pseudonym (if any): | Date of birth:  (Youth Class only) | | Tel: | |
| Email: | | | Fax: | |
| Address: | | | | Country: |

Title of this exhibit (in English):

Previous title in the last FIP exhibition (MUST indicate if different from above):

Short description of the exhibit (in English):

1. Introduction page included YES □ NO □
2. Philatelic Literature Exhibit Information Form included (only applicable for Literature Class) YES □ NO □

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| --- | --- | --- | --- | --- | --- |
| Exhibit class: | Number of frames: | Lap_A-B_méret_ábra.jpgDimensions of sheets: |  |  | |
|  |  | (Standard A: 23 x B: 29) |  | | A= cm |
|  |  |  |  | | B- cm |
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PAST AWARDS RECEIVED

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| FIP Patronage World Exhibitions/FIP Recognition Exhibitions | LG | G | LV | V | LS | S | SB | B |
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**International (FIAP/FEPA/FIAF) Exhibitions**

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National Exhibitions:

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The undersigned (exhibitor) hereby

1. agrees to accept all FIP Regulations (GREX, GREV, SREVS) and the individual regulations (IREX) applying to EFIRO 2024
2. confirms that the exhibit is owned by me (GREX Article 11,2)

Signature: Date: .

Commisssioner's declarations:

Remarks: (i) I confirm that the above information is correct

(ii)…………………………………………………………………………………………………………………………………………..

Signature: Date: .

*The exhibit will be delivered by the commissioner*

[www.efiro.ro](http://www.efiro.ro) [efiro2024@gmail.com](mailto:efiro2024@gmail.com)