

# Instructions for IDW '17 Exhibitors

The 24th International Display Workshops (IDW '17) is going to provide a special exhibit hall for display suppliers, equipment manufacturers, etc. You can expect visits from most of the conference attendees, who consist of a large number of technological experts in the display world. Last year IDW/AD '16 had more than 1200 attendees.

Display devices, appliances, manufacturing equipment, measuring instruments, software systems, components and materials for display technologies will be welcome. Please fill in the Application Form and send it to the IDW/ '17 Secretariat.

## Office Address

IDW '17 Secretariat  
c/o Bilingual Group.  
3-3-6 Kudan Minami, Chiyoda-ku, Tokyo, 102-0074, Japan  
Phone:+81-3-3263-1345 Fax:+81-3-3263-1264  
E-mail: idw@idw.or.jp

## Address of the Workshops and Exhibition Location

Sendai International Center, Sendai, Japan  
Aobayama, Aoba-ku, Sendai 980-0856, Japan  
Phone Number:+81-92-262-4111

## Exhibition Fee

100,000 Yen per one booth unit for the whole exhibition period, including one copy of Proceedings (USB flash memory), and Symposium admission for one person. Payment must be made in JAPANESE YEN by bank transfer, and the bank transfer fee must be paid at payer's expense.

## Standard Booth

Unit Width: 2.7 m, no partitions between booths.

A panel with 2.7 m-width and 2.1 m-height and a table with 1.8 m-length and 0.6 m-width are supplied. Pins can be used on the panel, but nails are not allowed. Taping to the table is not allowed. Electric power of 100 V, 60 Hz, 500 W is supplied. If you like nonstandard exhibition, please contact the IDW '17 Secretariat in advance.

## Exhibition Schedule (Tentative)

December 5, 13:00-17:00: setup  
December 6, 10:00-12:00: setup  
December 6, 12:40-18:00: exhibition  
December 7, 10:00-18:00: exhibition  
December 8, 10:00-14:00: exhibition  
December 8, 14:00-17:00: evacuation

## Application Deadline Date

October 23, 2017

## Hall Layout

Actual booth layout in the hall is determined by the IDW '17 committee.

## Customs Procedure for Foreign Exhibitors

We can not suggest anything on Japanese customs procedures, while we had many foreign exhibitors assisted by their Japanese subsidiaries or representatives.

## Others

All other equipment and expenses for transport, setup, evacuation, assurance, etc. have to be prepared and paid by exhibitors. Exhibitors are not allowed to sell goods in the exhibition.

[Please copy this form as needed.]

## IDW '17 EXHIBITION APPLICATION FORM

Send to: IDW '17 Secretariat  
c/o Bilingual Group Ltd.  
3-3-6 Kudan Minami, Chiyoda-ku, Tokyo, 102-0074, Japan  
Phone: +81-3-3263-1345 Fax: +81-3-3263-1264  
E-mail: idw@idw.or.jp

**We apply for IDW '17 Exhibition.**

Company Name (in Japanese): \_\_\_\_\_

Company Name (in English): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Co./Univ./Inst.

Div./Dept.

\_\_\_\_\_

No. Street/Town

City

State/Pref.

Zip/Area Code

Country

Contact Person: \_\_\_\_\_

Contact Person's Dept.: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

No. of Booths (Up to 2 booths) \_\_\_\_\_ Booth/s Do you need the bill for the Exhibition Fee? [ ] Yes [ ] No

Exhibit Item/Contents (in English): \_\_\_\_\_

Electric Power: \_\_\_\_\_ W

Phone/Fax Number to be listed on Brochure Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Please select the fields related to your exhibit contents. (Check all apply.)

- LCT       AMD       FMC       PH       OLED       3D  
 VHF       PRJ       EP       MEET       DES       FLX  
 INP       Oxide-Semiconductor TFT       AR/VR Hyper Reality  
 Lighting and Quantum Dot Technologies       Automotive Displays  
 Wide Color Gamut and Color Reproduction  
 User Experience and Cognitive Engineering       Haptics Technologies

Notes: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Please pay the Exhibition Fee to (Not for Registration Fee Payment.):

Name of Bank: Bank of Tokyo-Mitsubishi UFJ

(Swift Code: BOTKJPJT)

Ichigaya Branch (Branch No.014)

Account Number: (Ordinary Account) 0167640

Account: IDW

# Bank Transfer Fee must be paid at payer's expense.

(Secretariat use only)

Date Rcvd.:	Reference No:	Bill:	Date of Fee Transferred:
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[Please copy this form as needed.]