



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="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| National Exhibitions | 1'st | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | |
| | 1'st | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | |

I hereby confirm (I) my acceptance of all relevant FIP regulations together with Commissioner's declarations – Remarks:
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.

Exhibitor's Signature Comissioner's Signature

Date (DD/MM/YYYY) Date (DD/MM/YYYY)

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



*Contents: Please attach a copy of the contents page, preferably in English in addition to the published language.
Additional information e.g. preface, introductory page, etc., would be very useful.*

Author(s)

Exhibitor(s)
*(if different
from Authors)*

Title
*(in original
language)*

Publisher
(where to order)

Year of publication /of current version

Edition /1st, 2nd, 3rd, etc.

Number
of pages

Format
(width x height, in cm)

Language

Frequency of publication *(periodical only)*

ISBN/ISSN

Price *(Euro or USD)*

Quantity printed

Medium (paper/digital)

If digital, how will it be made available to HUNFILEX 2022.
Please also supply website log in details for full access.

Brief description
*(in English up to
50 words)*

Exhibitor's
Signature

Date
(DD/MM/YYYY)