APPLICATION FORM INNOVATION AWARD 2025

|  |  |  |
| --- | --- | --- |
| The undersigned (company name) |  | |
| Contact person |  | |
| Street and number |  | |
| Postal code and city |  | |
| P.O. Box |  | |
| Country |  | |
| Telephone |  | |
| E-mail |  | |
| Declares, under the terms laid down in the entry conditions with which he/she is in explicit agreement, that he/she will take part in the FEIBP Innovation Award 2025 with the following product: | | |
| Product |  | |
| Name & country of origin manufacturer |  | |
| Brand |  | |
| Motivation why your product should be eligible for the FEIBP Innovation Award 2025 | | |
| Name designer and country of origin |  | |
| Above mentioned product has not previously been entered in any other Innovation Award competition  Above mentioned product is intellectual property and/or copyright of the undersigned | | |
| Description of the product | | |
| Availability in the market |  | (after September 2024) |
| Retail price of the product (in Euros) | € | |
| We send in a photo of the product as JPEG file of size 640∙480 pixels to: [info@feibp.eu](mailto:info@feibp.eu) | | |
| **If you comply with the entry conditions, you will receive a written request for the submission of the product itself.** | | |
| Date | Signature | |

Application to be sent before **19 September 2025** to: FEIBP Innovation Award

e-mail: [info@feibp.eu](mailto:info@feibp.eu)