|  |
| --- |
| **FOREIGN VISITOR REGISTRATION FORM** |

**Please kindly provide required information for visitors.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name :** |  | | |
| **Visitor Name :** |  | | |
| **Position :** |  | | |
| **Gender :** | **Male  Female** | | |
| **Nationality :** |  | | |
| **Passport Number :** |  | | |
| **Mobile Phone Number:** |  | | |
| **Date of Arrival :** |  | **Date of Departure :** |  |

**Contact details of the Company**

|  |  |  |  |
| --- | --- | --- | --- |
| **Adress** |  | | |
| **City** |  | **Country** |  |
| **Phone** |  | **Fax** |  |
| **e-mail** |  | **www.** |  |

**Fields of the Company**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Retailer** | **Wholesaler** | **Manufacturer** |
| **Men** |  |  |  |
| **Women** |  |  |  |
| **Children** |  |  |  |
| **Sport Shoes** |  |  |  |
| **Casual Shoes and Sandals** |  |  |  |
| **Evening Shoes** |  |  |  |
| **Leathergoods** |  |  |  |
| **Bags** |  |  |  |
| **Leather Garments** |  |  |  |

**If you are a retailer ; Number of the stores owned by your company :**

|  |  |  |  |
| --- | --- | --- | --- |
| **1-5** | **6-10** | **11-20** | **20 – more** |

|  |  |
| --- | --- |
| **Please note : \* Each visitor should fill seperately the registration form. \* Please send the copy of your Passport attached to this form. \* The hotel accommodation is all-inclusive , including max. 3 days. \* The airport-hotel-exhibition area transports will be held by the organization.** | **Company Stamp & Signature** |