##### Registration Form

##### B2B MEETINGS –FOOD SECTOR

**BE0GRADE, BUCHAREST, SOFIA**

**20-24.11.2017**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1.Company Name (both):**  **Address:**  **VAT No (AΦΜ): TAX Office (DOY):** | | | | | | | |
| **2. Additional information** | | | | | | | |
| **Name & Job Title of representative that will participate and attend the meeting(s):** | | | | | | | |
| **Telephone:** | | | | | **Mobile:** | | |
| **E-mail:** | | | | | **Company Website:** | | |
| **3. Field of activity/products:** | | | | | | | |
|  | | | | | | | |
| **4. Annual Turnover (euro):** | **2014:** | | | **2015:** | | | **2016:** |
| **5. Export: YES NO** | | | **% Export sales:** | | | | |
|  | | |  |  | | |  |
| **6. Current Export markets :** | | | | | | | |
|  | | | | | | | |
| **7. Type of requested cooperation (Please select from the list below)**   1. **We would like to form a partnership or profile of desired business partner (please, specify which products you are seeking for in 200 words max):** | | | | | | | |
| **8. Please indicate the cities, in which you prefer to participate:** | | | | | | | |
| **BELGRADE 21.11.2017** | | **BUCHAREST 22-23.11.2017** | | | | **SOFIA 24.11. 2017** | |

**Παρακαλώ, όπως αποστείλετε τα συμπληρωμένη φόρμα συνοδευόμενη από συνοπτικό προφίλ της εταιρείας σας στα αγγλικά στην ηλ. δ/νση*:*** [***promotion@enterprisegreece.gov.gr***](mailto:promotion@enterprisegreece.gov.gr) ***,*** [***f.nakou@enterprisegreece.gov.gr***](mailto:f.nakou@enterprisegreece.gov.gr)**T.: 210 3355727**

**ΗΜΕΡΟΜΗΝΙΑ ΥΠΟΓΡΑΦΗ (Σφραγίδα)**