##### Registration Form

##### B2B MEETINGS –FOOD SECTOR

**BE0GRADE, BUCHAREST, SOFIA**

**20-24.11.2017**

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| --- |
| **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*** ***,*** ***f.nakou@enterprisegreece.gov.gr*****T.: 210 3355727**

**ΗΜΕΡΟΜΗΝΙΑ ΥΠΟΓΡΑΦΗ (Σφραγίδα)**