##### Registration Form

##### B2B MEETINGS

**Kalampaka, 10 – 11 June 2017**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Name /Company Name:**   **Address:** | | | | | |
| **2. 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 (optional)**   1. **Profile of desired business partner**   **b . Other form of cooperation (please specify):** | | | | | |

**Παρακαλoύμε, όπως αποστείλετε τη φόρμα συμπληρωμένη στο mail: z.legga@enterprisegreece.gov.gr .**

**ΗΜΕΡΟΜΗΝΙΑ ΥΠΟΓΡΑΦΗ**