



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	O % Export sale		
6. Current Export markets:			
7. Type of requested cooperation (optional)			
a. Profile of desired business partner			
b . Other form of cooperation (please specify):			

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

НМЕРОМНИІА УПОГРАФН