**** **WIN EURASIA 2019**

**14 – 17 March 2019, Istanbul**

Application form for international buyer program

* **Please type your answers and return this participation form to Deutsche Messe RUS (robert.bakirov@messe-russia.ru). Formal acceptance will be given to you by Hannover Fairs Turkey Fuarcılık A.Ş. as soon as eligibility is cleared.**
* **Application forms must be returned not later than [February 1, 2019].**
* **Please indicate whether any of the information you have provided is confidential.**

1. **Details shown at 2 to 8 will automatically be given to Hannover Fairs Turkey Fuarcılık A.Ş.for visitor information.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Name of the Company:** | |  | | | | |
|  | |  | | | | |
| 1. **Status of the Company:**   **please tick,** | |  | | | | |
| **Manufacturer**  **Importer**  **Retailer**  **Manufacturer-Importer**  **Wholesaler**  **Chain Store**  **Other (please specify)** | |  | | | | |
|  | |  | | | | |
| 1. **Company Address**   **(Please include postcode)** | |  | | | | |
|  | |  | | | | |
| **Telephone & Fax:** | |  | | | | |
|  | |  | | | | |
| **E-mail & Website Address:** | |  | | | | |
|  | |  | | | | |
| 1. **Company representative who will attend to the Program and his/her Position** | |  | | | | |
|  | |  | | | | |
| 1. **Name of parent or holding Company (if applicable)** | |  | | | | |
|  | |  | | | | |
| 1. **Brief description of goods and/or services imported from all over the World** | |  | | | | |
|  | |  | | | | |
| 1. **Detailed description of goods and/or services demanded from Turkey.** | |  | | | | |
|  | |  | | | | |
| 1. **Total number of employees and the year of count** | |  | | | | |
|  | |  | | | | |
| **1-10** | **10-50** | | | **50-100** | | **More than 100** |
|  | |  | | | | |
| 1. **What is company`s annual turnover and year of count (optional)?** | | | |  | | |
|  | | | |  | | |
| 1. **What is the sum of your total annual imports in years 2016 and 2017 (world-wide)?** | | | |  | | |
|  | | | |  | | |
| 1. **What is the value of your annual imports from Turkey and year of count?** | | | |  | | |
|  | | | |  | | |
| 1. **How many times has your company visited Turkey?** | | | |  | | |
|  | | | |  | | |
| **Previous visits to WIN EURASIA** | | | |  | | |
| **Visits to other exhibitions in Turkey, please name** | | | |  | | |
| **Independent visits to Turkey** | | | |  | | |
|  | | | |  | | |
| 1. **Are any of your objectives in participating in this mission represented by the following?** | | | |  | | |
| **Categories** | | | |  | | |
|  | | | | **Yes** | **No** | |
| **Import from Turkey** | | | |  |  | |
| **Preliminary research into Turkish market** | | | |  |  | |
| **Seeking a representative** | | | |  |  | |
| **Meeting new suppliers** | | | |  |  | |
| **Meeting existing representatives/suppliers** | | | |  |  | |
| **Partners for manufacture under license of joint venture** | | | |  |  | |
|  | | | |  | | |
| **If other, please give details** | |  | | | | |
|  | |  | | | | |
| 1. **Do you have any local subsidiary or representatives in Turkey?** | | **Yes** | **No** | | | |
|  |  | | | |
|  | |  | | | | |
| **If “Yes”, please give following details** | |  | | | | |
|  | |  | | | | |
| **Name & Address** | |  | | | | |
| **Type of Contact** | | **Subsidiary**  **Associate Company**  **Commission Agent** | | | | |
|  | |  | | | | |
| I commit to participate bilateral meeting of the buyer mission program. | | | | | | |
|  | |  | | | | |
| **Name of the person filled this form and position:** | |  | | | | |
|  | |  | | | | |
| **Date:** | |  | | | | |
|  | |  | | | | |
| **Signature** | |  | | | | |