**** **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** |  |