

# Greater New York Dental Meeting Export Directory Participation form



- 1) Company Name: \_\_\_\_\_
- 2) Address: \_\_\_\_\_
- 3) Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_ 4) Booth Number(s): \_\_\_\_\_
- 5) Number of Employees: \_\_\_\_\_
- 6) Company Profile:
  - a)  Not Exporting  
 Currently Exporting; interested in entering into new overseas markets
- 7) Name and Title of Company personnel at show for contact with international business visitors:
  - 1) \_\_\_\_\_ Title: \_\_\_\_\_
  - 2) \_\_\_\_\_ Title: \_\_\_\_\_
- 8) Product lines or services your Company wishes to export  
(please type or print neatly):  
\_\_\_\_\_  
\_\_\_\_\_
- 9) International Business in which your Company is interested:
  - Direct Sales
  - Foreign Agents/Distributors
  - Joint Ventures
  - Licensing Agreements
- 9a) If appropriate, specify countries where you are not seeking any of the above business ventures: \_\_\_\_\_
- 10) Which region in the world are you most interested in marketing your product:
  - Worldwide
  - South America
  - Caribbean
  - Eastern Europe/Russia
  - Western Europe
  - Central America
  - Africa
  - Canada/Mexico
  - Middle East/Asia
  - Australia/New Zealand