

BUSINESS MATCHING FORM



15th-17th November, 2016

Hall No. V, Bombay Convention & Exhibition Centre,
Goregaon (East), Mumbai, India.
Time: 10.00 a.m. to 6.00 p.m.
[Last day open till 4.00 p.m.]

To be part of the Business Matching programme, please complete and return the following form by Fax on 91-22-2496 2297 or e-mail us the scanned copy at operations@worldindexindia.com

Full Name.....
 Designation..... Organisation.....
 Year of Establishment..... Address.....
 City..... State..... Country.....
 Pin Code..... Telephone..... Mobile.....
 Fax..... E-mail..... Website.....

Business Type

- | | | | |
|---------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Manufacturer | <input type="checkbox"/> Exporter | <input type="checkbox"/> Export Agent | <input type="checkbox"/> Importer |
| <input type="checkbox"/> Import Agent | <input type="checkbox"/> Buying Office | <input type="checkbox"/> Buying Agent | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Distributor | <input type="checkbox"/> Trading House | <input type="checkbox"/> Wholesaler | <input type="checkbox"/> Retailer |
| <input type="checkbox"/> e-Tailer | <input type="checkbox"/> Service Provider | <input type="checkbox"/> Contractor | <input type="checkbox"/> Government/Trade Body |

Industry sector/s you are interested in

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Apparel & accessories | <input type="checkbox"/> Automobiles & accessories | <input type="checkbox"/> Baby Products |
| <input type="checkbox"/> Bicycle | <input type="checkbox"/> Chemicals | <input type="checkbox"/> Construction | <input type="checkbox"/> Consumer electronics |
| <input type="checkbox"/> Cosmetics | <input type="checkbox"/> Electronic & electrical | <input type="checkbox"/> Engineering machinery | <input type="checkbox"/> Food |
| <input type="checkbox"/> Footwear | <input type="checkbox"/> Furniture | <input type="checkbox"/> Gifts & premium | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Healthcare products | <input type="checkbox"/> Home appliances | <input type="checkbox"/> Interior | <input type="checkbox"/> IT |
| <input type="checkbox"/> Jewellery | <input type="checkbox"/> LED & Lighting | <input type="checkbox"/> Machinery & Components | <input type="checkbox"/> Musical instruments |
| <input type="checkbox"/> Packaging | <input type="checkbox"/> Pharma | <input type="checkbox"/> Plastic products | <input type="checkbox"/> Solar |
| <input type="checkbox"/> Sports equipments | <input type="checkbox"/> Stationery | <input type="checkbox"/> Thermal products | <input type="checkbox"/> Toys |
| <input type="checkbox"/> Traditional chinese medicine | <input type="checkbox"/> 3D glasses / Vr glasses | <input type="checkbox"/> Others: _____ | |

Indicate the type of partners or collaboration you are interested in

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Distributorship | <input type="checkbox"/> Licensing | <input type="checkbox"/> Franchising | <input type="checkbox"/> Joint venture partners |
| <input type="checkbox"/> Merger & Acquisition | <input type="checkbox"/> Joint Research | <input type="checkbox"/> Technology transfer | <input type="checkbox"/> Manufacturer's Rep |
| <input type="checkbox"/> Outsourcing | <input type="checkbox"/> Others : _____ | | |

I, _____, hereby request you to kindly arrange B2B meeting with the following companies at the proposed timings at the show venue:

Company Name	Date	Timing
Meeting 1: _____	_____	_____
Meeting 2: _____	_____	_____
Meeting 3: _____	_____	_____
Meeting 4: _____	_____	_____
Meeting 5: _____	_____	_____

Date: _____ Signature: _____