

**VISITOR
REGISTRATION**

Name :- _____

Organisation :- _____

Designation: - _____

Address: - _____

City :- _____ Pincode :- _____ Country :- _____

Tel: - _____ Fax: - _____

Website: - _____ E-mail: - _____

Areas of Business :- _____

Sector:- Public Government Private

Decision Level in Company / Organisation:-
Top Management Middle Management Others

Please indicate your area of interest.

- Food & beverages
- Natural medicine
- Personal care
- Natural raw material & ingredients
- Packaging & Processing
- Other natural products
- Services

Purpose of visit (Please tick right)

- Place orders
- Evaluate new products & agencies
- Identify joint ventures
- Discuss future business with existing suppliers/manufacturers
- Evaluate show for participation
- To meet a company personally

If Yes: Company Name: - _____ Time: - _____

Any other areas of interest (If yes, please specify) _____

How did you come to know about PANACEA 2010 (Please tick)

- Newspapers / Magazines
- Direct Mail
- Invitation
- Internet
- Others

PLEASE FAX / EMAIL THE DULY FILLED REGISTRATION FORM TO:

Tel: 0091-22-28410164 Fax: 0091-22-67101212 Email: info@seishidocommunications.com

Thank You for registering at Panacea2010- Natural Products Expo India.