

ORGANISERS



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VISITOR REGISTRATION FORM



No:

Name :

Designation :

Company :

Nature of Business / Products :

Address 1 :

Address 2 :

City : District :

State :

Pincode :

Mob / Ph :

Email :

Are you a (Please Tick)

- Manufacturer Distributor Traders Service Provider End User
- Others.....

Purpose of Visit: (Please Tick)

- Market Analysis Product Information Making contacts
- Evaluate for future participation

How did you come to know about this exhibition? (Please Tick)

- SMS Email Invitation Entry Ticket Website
- Poster / Banner / Hoarding Newspaper Advt Magazine Advt
- TV Advt Bus Panel Advt