



COMPANY PROFILE

Premier led Mission to New York City: October 15 – 20, 2023

The information provided in this section will be included in the Directory of Participants and used by the consultant to arrange business meetings for your company. We strongly recommend you provide as much detail as possible so that our team can effectively help you achieve your company's objectives for this show.

Company/Organization: _____

Participant 1 _____ Title: _____

Participant 2 _____ Title: _____

Address: _____

Telephone number: _____ Cell: _____
(include area code)

Website: _____

Type of company (Check all that apply to your company)

Small- or medium-sized enterprise

Educational Institution

Large enterprise

Under 40 entrepreneurs

Manufacturer

Aboriginal-owned (51%)

Service provider

Woman-owned (51%)

Research Institute

Other: _____

Sectors (please specify in the spaces provided)

Information and communications technologies

Agriculture and processed foods

Life sciences/ Bio

Fish and seafood

Advanced Manufacturing

Food and Beverage

Education

Aerospace

Professional Services

Other: _____

Describe the products and/or services your company intends to promote during this trade activity. This information will be shared with the matchmaker to help align your business-to-business meetings

Identify your company's longer-term objective(s) for this market.

Finding a sales representative/distributor/agent

Finding investment opportunities

Finding joint venture, technology partner(s)

Exposure to new business prospects

Product testing/market research

Immediate export sales

Build on existing relationships

Labor recruitment

Other: _____

Elaborate on the objective(s) you have identified above

Are there other markets globally that you wish to pursue? (If yes, please specify)

What are your company's main objectives on this mission?

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*You can provide your own one pager - please attach with application

(The information you enter in this section will be published in the Directory of Participants)

Example: Your organization's business activities, products and/or services which you would like to promote during this mission.

COMPANY LOGO

Please provide a copy of your company logo with application.

EMERGENCY INFORMATION — who we should contact in case of an emergency. Please list for all delegates.

Name: _____ Phone: _____

Address: _____

Email: _____