

COMPANY PROFILE

Multi-Sector Mission to Toronto, Ontario: November 25th - 29th, 2024

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

Company/Organization:	
Participant 1	Title:
Participant 2	<u>.</u>
Address:	
Telephone number: (include area code)	Cell:
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 com	pany's main objectives on this mission?
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*You can provide your o	wn one pager - please attach with application
(The information you en	er in this section will be published in the Directory of Participants)
Example: Your organizati mission.	on's business activities, products and/or services which you would like to promote during this
COMPANY LOGO	
Please provide a copy of	your company logo with application.
EMERGENCY INFORM	MATION — who we should contact in case of an emergency. Please list for all delegates.
Name:	Phone:
Addross.	
Email:	