

## **COMPANY REGISTRATION FORM**

Multi-Sector Mission to Toronto, Ontario - June 9th-13th, 2025

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</u> as possible so that our team can effectively help you achieve your company's objectives for this show.

Company Name:	
Address:	
Telephone number: (include area code)	·
Website:	
Type of company (check all that apply)	
Small or medium-sized enterprise	Educational Institution
Large enterprise	Under 40 entrepreneurs
Manufacturer	Aboriginal-owned (51%)
Service provider	Women-owned (51%)
Research Institute	Other:
Sector (please specify)	
Aerospace and Defence	Manufacturing or Processing
AgriFood	Professional Services
Bioscience/Life Sciences	Retail
Clean Technology or Renewable Energy	Other:
Creative or Cultural Industries	
Educational Institution	
Fisheries or Aquaculture	
Information and Communications Technology	

Describe the products and/or services your company intends to promote during this trade activity.	
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 event?		
COMPANY PROFILE		
Please provide a detailed description of the business's		
(The information you provide in will be published in th	, , ,	
Example: Your business description, activities, produc like to promote during this event.	ts and/or services, goals, objectives, etc which you would	
PARTICIPANT INFORMATION (Maximum 2 par	ticipants per company)	
Participant 1:		
First name:	Family name:	
Business title/Occupation:		
Mailing address of participant: (if different than headquarters):		
Telephone number:	Cell number:	
(with area code)	(with area code)	
Contact number during event (if different from cell):	Email:	
Emergency Contact Information:		
Name:		
Phone number: (with area code)		
Email:		

Participant 2:		
First name:	Family name:	
Business title/Occupation:		
Mailing address of participant: (if different than headquarters):		
Telephone number: (with area code)	Cell number: (with area code)	
Contact number during event (if different from cell):	Email:	
Emergency Contact Information:		
Name:		
Phone number: (with area code)		
Email:		
INTERESTED MARKETS:		
Toronto, Ontario		
Western Canada		
REGISTRATION INFORMATION:		
Registration Fee: \$500		
Registration Deadline: March 21st, 2025		
Please send your completed registration form, company profile page, and cheque to:		

Innovation PEI c/o Jamie Blanchard - Global Trade Officer jrblanchard@gov.pe.ca 902 314 0749