



BUSINESS DELEGATION TO LONDON

7 NOVEMBER 2017

BUSINESS DELEGATION PARTICIPATION FORM

COMPANY INFORMATION

The below information will be used in all the official documents (The company directory/catalogue that will be printed)

Company Name:

Contact Person Name, Title & Position:

Additional Participant(s) Name Title & Position:

Website:

Email:

Telephone:

Fax:

Address:

COMPANY PROFILE:

Please provide a short description (max 100 words) of your company including its strong features. Whatever you provide here will be used in all the official documents (and the directory that will be printed)



CYPRUS
CHAMBER OF
COMMERCE AND
INDUSTRY



Ministry of Energy, Commerce,
Industry & Tourism

Target Companies:

(Please state the type of companies that you would potentially like to have on your table at the dinner)

Date:

Signature:

Please return the above form to
CCCI, Dept of International and Public Relations
By the 13 October 2017
to lia@ccci.org.cy