## International Local Event Form

[Introductory/explanatory text tailored to specific event type.]

Fields marked with \* are required.

## **Contact and Company Information**

Company Name*		
First Name*		
Last Name*		
Salutation	V	
Title/Responsibility		
Company address*		
City*		
Province		
Postal Code		
Phone		
Fax		
Email*		
Web site	http://	
Meeting Details		
Available to meet on <date>?* <math>\bigcirc</math> Yes <math>\bigcirc</math>No</date>		
Preferred time of meeting?*		

Also indicate where meeting should take place.

Event specific information will vary by event.

Have you previously tried to import from the U.S.?  $\bigcirc$  Yes  $\bigcirc$  No

Products/services you are looking to buy from the U.S.\* (Please describe)

I am currently looking for representation in <Country>? O Yes ONo OPrefer Direct Imports

Submission of business or personal information is voluntary. Please be aware of our Privacy Policy.

Submit Application

Public reporting for this collection of information is estimated to be 5 minutes per response, including the time for reviewing instructions, and completing and reviewing the collection of information. All responses to this collection of information are voluntary, and will be provided confidentially to the extent allowed by law. Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB control number. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Clearance Officer, International Trade Administration, Department of Commerce, Room 4001, 14th and Constitution Avenue, N.W., Washington, D.C. 20230.