

11th - 13th December, 2009

New Delhi, India

Premier medical & healthcare techno trade event TM

Medifest

A Vantage Trade Fair

BUYER'S REGISTRATION FORM

Company Name : _____

Country : _____

Website URL : _____

Product Category : _____

Chamber of Commerce,
Association allied with : _____

Represented By : _____

Title (Mr. /Mrs.) : _____

First Name : _____ Last Name : _____

Designation : _____

Company's Turnover : _____

Buying Budget : _____

Specific Products Looking
from Medifest : _____

Special Requirement
(If any) : _____

Do you want to meet Specific Companies / Existing Potential Customers ?

Yes No

Other Requirements:

*Hotel Accommodation required ? Yes No

*Visa Invitation Letter required ? Yes No

***Use the prescribed forms for details**

Co. Stamp & Auth. Signature

Date...../...../2009

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