

FORM II**Exhibitor Registration Form**

1. Company Name : \_\_\_\_\_
2. Country : \_\_\_\_\_
3. Address : \_\_\_\_\_  
\_\_\_\_\_
4. Phone Number : \_\_\_\_\_
5. Fax Number : \_\_\_\_\_
6. E-mail Address : \_\_\_\_\_
7. Homepage Address : \_\_\_\_\_
8. Contact Person : ( ) Mr. / ( ) Ms. \_\_\_\_\_
9. Exhibit Items :

Item	Description	Please specify
<b>F&amp;B (4 items including at least 1 organic/vegan product)</b>		
Coffee	<input type="checkbox"/> Roasted Bean <input type="checkbox"/> Instant Coffee <input type="checkbox"/> Others	
Confectionery	<input type="checkbox"/> Bakery <input type="checkbox"/> Cookie <input type="checkbox"/> Chocolate <input type="checkbox"/> Dessert <input type="checkbox"/> Others	
Processed Food	<input type="checkbox"/> Pre-cooked Food <input type="checkbox"/> Others	
Beverage	<input type="checkbox"/> Fruit Juice <input type="checkbox"/> Tea <input type="checkbox"/> Others	
Fruit	<input type="checkbox"/> Puree <input type="checkbox"/> Dried <input type="checkbox"/> Others	
Vegetable	<input type="checkbox"/> Dried <input type="checkbox"/> Others	
Others	<input type="checkbox"/> Spice <input type="checkbox"/> Sauce <input type="checkbox"/> Nut <input type="checkbox"/> Honey <input type="checkbox"/> Others	
<b>Eco-friendly/Sustainable Kitchen Tool (1 item)</b>		
Cookware	<input type="checkbox"/> Cutting Board <input type="checkbox"/> Apron Scrubbers <input type="checkbox"/> Others	
Tableware	<input type="checkbox"/> Spoon <input type="checkbox"/> Folk <input type="checkbox"/> Chopsticks <input type="checkbox"/> Table Mat <input type="checkbox"/> Tray <input type="checkbox"/> Others	

*\* Please note that exhibit items include only for room temperature storage*

*\* Please indicate organic/vegan products*

10. Year of Establishment: \_\_\_\_\_ 11. Number of Employees: \_\_\_\_\_
12. Annual Sales : US\$ \_\_\_\_\_ (year: \_\_\_\_\_)
13. Export Market(s) : \_\_\_\_\_
- Experience of Export to Korea:  YES  NO
14. Agent's Name in Korea, if any: \_\_\_\_\_
- Working relationship with Korean agent:  Exclusive  Not exclusive

15. Minimum Quantity/Order: \_\_\_\_\_

16. Minimum Value/ Order: US\$ \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

FORM III**Price Sheet of Exhibit Items**

(Please type all entries.)

Company Name : \_\_\_\_\_

Country : \_\_\_\_\_

	<b>Product Code/No.</b>	<b>Description of Goods</b>	<b>Reference Price /Unit(FOB:US\$)</b>	<b>Remarks</b>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
<b>Example</b>		Fruit Juice	US3.-\$ / liter	

FORMIV

**Ingredient list of Exhibits Items**

(Please type all entries.)

Company Name : \_\_\_\_\_

Country : \_\_\_\_\_

	<b>Product</b>	<b>Ingredients of product (with proportion rate)</b>	<b>Remarks</b>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Example	Coconut chips	Cashew nuts 75%, Coconut Flakes 15%, Syrup 9%, Salt 1%	