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**BUYERS PROGRAMME APPLICATION FORM**

**Please fill out the following form in all its fields and send it to** **italy@italcham.co.za**

**Please ensure that the following form is completed by TYPING and not by hand**

|  |  |
| --- | --- |
| **COMPANY** |  |
| **REGISTERED COMPANY NAME** |  |
| **PHYSICAL ADDRESS** |  |
| **PROVINCE** |  |
| **CITY** |  |
| **COUNTRY** |  |
| **WEBSITE** |  |
| **NUMBER OF EMPLOYEES** |  |
| **TYPE OF ACTIVITY AND PETS HANDLED** |  |
| **TYPE OF CUSTOMERS** |  |
| **DISTRIBUTION CHANNELS /****SHOPS /****etc** |  |
| **2023 TURNOVER (ZAR)** |  |

|  |  |
| --- | --- |
| **APPLICANT****(MUST BE A DECISION MAKER)** |  |
| **FULL NAME** |  |
| **SURNAME** |  |
| **ROLE** |  |
| **TELEPHONE NUMBER OF THE APPLICANT** |  |
| **EMAIL ADDRESS OF THE APPLICANT** |  |
|  |  |
| **PRODUCT CATEGORIES OF INTEREST (YES / NO)** |  |
| **PET FOOD** |  |
| **PET ACCESSORIES** |  |
| **HYGIENE AND CARE PRODUCTS** |  |
| **RAW MATERIALS** |  |
| **MACHINERY** |  |
| **PACKAGING** |  |
| **SERVICES AND TECHNOLOGIES** |  |

|  |  |
| --- | --- |
| **SPECIFIC PRODUCTS / SERVICES / TECHNOLOGIES OF INTEREST**  |  |
| **1)** |  |
| **2)** |  |
| **3)** |  |
| **4)** |  |
| **5)** |  |
| **6)** |  |
| **7)** |  |
| **8)** |  |
| **9)** |  |
| **10)** |  |

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLACE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE:**