



**CIBUS TEC OCTOBER 27-30, 2009
FOREIGN DELEGATIONS**



Mr / Ms: _____

First name: _____

Last name: _____

Job Title: _____

Company: _____

Address: _____

Postal Code: _____

City: _____

Country: _____

Phone.: _____

Fax: _____

e-mail: _____

Web site: _____

- Spoken languages:**
- Italian English French Germany Spanish
- Other: _____

Company Information:

Company description: _____

Sector of interest: _____

Number of Employees: _____

Total sales 2008: _____

Flight Details:

Arrival	Date		Departure	Date	
	Time	Airport		Time	Airport

Please fax this application to the Italian Chamber of Commerce of Toronto at 416-789-7160 or e-mail it to tedesco@italchambers.ca (RE: Cibus Tec application) by July 31, 2009.



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