



VENDOR REGISTRATION FORM

Company Details and General Information:

1. Name of Individual/Company:	
2. Street Address: Postal Code: City: Country:	3. P.O. Box and Mailing Address:
4. Tel:	5. Fax:
6. Email Address of Contact Person:	7. Website:
8. Contact Name and Title:	
9. Parent Company (Full Legal Name):	
10. Subsidiaries, Associates and/or Overseas Representative(s) - (attach a list if necessary):	
11. Type of Business (mark one only): Corporate/Limited <input type="checkbox"/> Partnership <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
12. Nature of Business: Manufacturer <input type="checkbox"/> Authorized Agent <input type="checkbox"/> Trader <input type="checkbox"/> Consulting Company <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
13. Year Established:	14. Number of Full-Time Employees:
15. License #/State or country where registered:	16. VAT #/Tax ID #:
17. Technical Documents available in what type of language:	18. Working Language(s):





INSTRUCTIONS FOR COMPLETION:

The form should be typewritten in uppercase and completed clearly and accurately ensuring that all questions are answered.

The numbers below correspond to item numbers on the registration form:

1. Full name of company.
2. Full street address.
3. Full mailing address (including P.O. Box, if any).
4. Telephone number, including correct country and area codes.
5. Fax number, including country and area codes.
6. Email address of the person who should be contacted regarding billing, accounting issues or other questions relating to your company.
7. WWW Address.
8. Provide name of person (including title) or department to whom correspondence should be addressed.
9. Full legal name of parent company, if any.
10. Please provide, on a separate sheet, if necessary, names and addresses of all subsidiaries, associates and overseas representatives if any.
11. Please tick one box. If the last box is ticked, please specify.
12. Please tick one box. If the last box is ticked, please specify. If the company is a manufacturer of some products and a trader/agent of others, which they do not manufacture, both boxes should be ticked.
13. Indicate the year in which the organization was established under the name shown in Item 1.
14. Indicate the total number of full-time personnel in the company.
15. Provide the license number under which the company is registered, or the State where it is registered.
16. Provide the VAT number or Tax ID of the company.
17. Please tick the boxes for which languages the company is able to provide technical documents. Please specify other languages.
18. Please tick the boxes for which languages the company is able to work in. Please specify other languages.