|  |  |  |
| --- | --- | --- |
| **Please complete and return by 9 January 2023**Please complete the current form digitally, sign electronically or manually and return to seren.porteous@glasgowchamberofcommerce.com **Cost: £500**\*This does not include flights, accommodation or in market costs.**Company Application Form** To participate in a Virtual Trade Mission | **Trade Mission:**Lower Saxony and Bremen, Germany – March, 2023  | **Organising Chamber:** Glasgow Chamber of Commerce  |
|  |
| **Company Information**  |
| Name of Company | Main Contact | Position in Company  |  |  |
|  |
| Address |  | City | Postcode | Website |
|  |  |  |  |
| Office Number | Mobile Number | Email Address |  |  |
|  |  |  |
| If selected for the trade mission, are you willing to participate in marketing & communications e.g. case studies? |
| Yes [ ]  | No [ ]  |  |  |  |
| **About Your Business** |
| Is your business new to exporting? Yes/No | Is your business new to this market? (Yes/No) | Annual Turnover at last year end (£) | Turnover from International Sales at last year end (£) | No. of Employees |
|  |  |  |  |  |
| **If the answer to either of the above is No, then please provide details of previous exports** |       |  |  |  |
|  |  |  |  |  |  |  |  |
|  |
| **[** |
| **Additional Information** |
| **Describe your business and the sectors that you work with** |  |
| **Describe your products / services**  |  |
| **How does your business demonstrate a commitment to the environment and working sustainably?** |  |
| **What is your experience in this market to date?** |  |
| **What do you hope to gain from the trade visit? E.g Do you hope to sell, buy, partner, learn?** Please be as specific as possible.  |  |
| **Please describe the types of companies that you would like to meet with?** E.g. what industry, product, service provided, turnover/ size of business you’d like to meet. Please be as specific as possible. If there are certain companies you’d like to meet with, please list them here. |  |
| **What assistance do you require?** (market awareness, sector information, new contacts, support in market) |  |
| **Are you a member of a Chamber of Commerce?** (Yes/No) |  | If so, which one(s) |       |
| **Countries currently trade internationally?** (if applicable) |  |  |  |
|  |
| **Signature** |
| Thank you for completing this form which will be utilised by the local Chamber of Commerce and shared with the Scottish Chambers of Commerce Ltd and its approved partners. |
| Name (Please Print) |  | Signature |
|  |  |
| Date |  |
|  |