

**Please complete and return if you are interested in receiving updates for
START THINKING EXPORT! and information on *Partners for Trade* seminars.**

Please type or print clearly

NAME _____

TITLE _____

COMPANY _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE (_____) _____ FAX (_____) _____

List topics you like covered in training seminars: _____

List countries of interest: _____

For businesses only:

Which best describes your business?

Manufacturing Service Retail Wholesale Distribution

What is your business industry? _____ # of Employees _____

Are you currently exporting? Yes No Are you currently importing? Yes No

If yes, what percentage of your sales are international? _____%

what country(ies) do you primarily export to? _____

If no, what country(ies) are you interested in exporting to? _____

**Please complete
and return to:**

Start Thinking Export!
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