

Pre-registration Form
Mega Macao
21-23 April 2008
The Venetian Convention and Exhibition Center, Macao

- Simply complete all sections below and fax to +852 2311 6629 or by mail to
Customer Relations Department, 30/F, One Kowloon, No. 1 Wang Yuen Street, Kowloon Bay, Kowloon, Hong Kong.
- For any queries, please email: cr@kenfair.com or fax: +852 2311 6629

Please complete in English 請用英文填寫
Please complete all sections for successful registration

***Business Nature:**

- | | | | | |
|--|--|---------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Chain Store /
Dept. Store | <input type="checkbox"/> Exporter | <input type="checkbox"/> Importer | <input type="checkbox"/> Retailer | <input type="checkbox"/> Mail Order House |
| <input type="checkbox"/> Manufacturer | <input type="checkbox"/> Wholesaler | <input type="checkbox"/> Agent | <input type="checkbox"/> Buying House | <input type="checkbox"/> Promotions /
Premiums Agency |
| <input type="checkbox"/> Design House | <input type="checkbox"/> Internet Retailer | <input type="checkbox"/> Trading Firm | | |
| <input type="checkbox"/> Others (Please Specify) _____ | | | | |

*** Please select your interested Products:**

- | | | |
|--|---|--|
| <input type="checkbox"/> Toys | <input type="checkbox"/> Gifts & Premiums | <input type="checkbox"/> Houseware |
| <input type="checkbox"/> Home Textiles | <input type="checkbox"/> Apparel | <input type="checkbox"/> Fabrics and Accessories |
| <input type="checkbox"/> Consumer Electronics | | |
| <input type="checkbox"/> Others (Please Specify) _____ | | |

***Contact Information:**

*Title: Dr. Mr. Mrs. Ms.

*First Name: _____ *Last Name: _____

Position: _____

*Company Name: _____

*Suite/ Building: _____

*Street: _____

*City: _____ State/ Province: _____

*ZIP/ Postal Code: _____ *Country: _____

*Tel: _____ *Fax: _____

*Email: _____ Website: _____