



Tissue World

28-31 March 2011
Acropolis • Palais des Expositions • Nice, France

Tissue World 2011
28-31 March, 2011 (Conference days)
29-31 March 2011 (Exhibition days)
Acropolis - Palais des Expositions, Nice, France

IMPORTANT:

- **Visitor pre-registration: The entrance to the show is €15 if you pre-register before the opening. Your badge will be ready for you at Visitors Registration Desk in the Acropolis Exhibition Hall (Palais des Expositions), Nice.**
- **Onsite registrations will be charged €30 entrance fee.**
- **To secure your registration, please register online at: (www.qvc.qc.ca/TissueWorld/nice2011) or alternatively complete all sections and return to: tissueworld2011vc.qc.ca or fax to : +1 418 523-1371**

TRADE VISITOR REGISTRATION FORM – ALL FIELDS MUST BE COMPLETED

First name: _____ Last name / Surname: _____

Job Title: _____ Company: _____

Address: _____

City: _____ State / Province: _____

Country: _____ Zip / Postal Code: _____

Telephone: _____
(include country and city code)

Email: _____

FOR ANALYSIS OF ATTENDEES, CAN YOU PLEASE ANSWER THESE 3 QUESTIONS:

1. Which category below best describes your position or role?

- | | |
|--|---|
| <input type="checkbox"/> CEO/President/Chairman | <input type="checkbox"/> Research & Development Manager |
| <input type="checkbox"/> Sales Director/Manager | <input type="checkbox"/> Engineer/Operator/Technician |
| <input type="checkbox"/> Purchasing Director/Manager | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Technical Director/Manager | <input type="checkbox"/> Administrative/Finance Manager |
| <input type="checkbox"/> Production Manager | <input type="checkbox"/> Mill/Plant Manager |

2. What is your company's activity:

- | | |
|--|---|
| <input type="checkbox"/> Paper/Tissue making | <input type="checkbox"/> Trading |
| <input type="checkbox"/> Converting | <input type="checkbox"/> Financial services |
| <input type="checkbox"/> Retailing | <input type="checkbox"/> Supplier of equipment and raw materials for tissue making and converting |
| <input type="checkbox"/> Packaging | |
| <input type="checkbox"/> Consulting | |



3. As an attendee to Tissue World 2011, you are interested in:

- | | |
|---|---|
| <input type="checkbox"/> Automation and Control | <input type="checkbox"/> Knives and Blades |
| <input type="checkbox"/> Chemicals | <input type="checkbox"/> Paper Machine Accessories |
| <input type="checkbox"/> Consultant Services | <input type="checkbox"/> Paper Making Machinery |
| <input type="checkbox"/> Converting and Printing Machinery | <input type="checkbox"/> Press and Information Services |
| <input type="checkbox"/> Converting and Printing Supplies | <input type="checkbox"/> Pulp and Recycled Fibre |
| <input type="checkbox"/> Dispensers and Dispenser Systems | <input type="checkbox"/> Pulping and Stock Preparation |
| <input type="checkbox"/> Drying | <input type="checkbox"/> Used Machinery |
| <input type="checkbox"/> Dust Control and Air Systems | <input type="checkbox"/> Wires, Felts and Clothing |
| <input type="checkbox"/> Engineering Services | <input type="checkbox"/> Wrapping and Packaging Equipment |
| <input type="checkbox"/> Environmental, water treatment and discharge control | <input type="checkbox"/> Wrapping and Packaging Supplies |
| <input type="checkbox"/> Finished Products | <input type="checkbox"/> Inks, Glues and Dyes |
| <input type="checkbox"/> Jumbo Rolls | |

Yes, I would like to receive a free subscription to *Tissue World* magazine.

Please enter the month you are born: _____

(Note : this question is required by our subscription auditing bureau)

CANCELLATION/CHANGE POLICY:

If you registered to attend the Tissue World 2011 exhibition and you are unable to attend, you may substitute a colleague at any time with no additional charge (please send us an email with the changes). Otherwise, no visitor registration will be refunded in case of cancellation or no-show. Substitutions are to be notified by email to TissueWorld2011@qvc.qc.ca.

PAYMENT DETAILS:

Total Amount Due: € _____

Credit Card: (circle one): **Visa** **MasterCard**

Name on card: _____

Card Number: _____ CVC: _____

Expiry Date: _____ (mm/yyyy)

Signature: _____

(I understand that my signature authorizes UBM Asia Trade Fairs to charge the registration fees to my credit card)