

ITALIAN FOOD&WINE HILTON AMSTERDAM 11 NOVEMBER 2024

COMPANY NAME	
CONTACT PERSON	
COMPLETE ADDRESS	
TELEPHONE NUMBER	
MOBILE NUMBER	
E-MAIL ADDRESS	
WEB SITE	
TYPE OF ACTIVITY	□ WHOLESALER □ IMPORTER □ GDO □ DELICATESSEN □ RESTAURANT □ OTHER
SEND TO: INFO@ITALIANCHAMBER.NL, PREFERABLY BEFORE 15th October 2024	
PLACE AND DATE:	
SIGNATURE:	



