

**TRADE VISITOR REGISTRATION FORM**

Kindly send us the filled form:

Title:  Mr.  Ms.  Mrs. Others \_\_\_\_\_ (Please specify)

Please print in capital letter

First Name:																				
Middle Name:																				
Family Name:																				

Company: \_\_\_\_\_

Job Title: \_\_\_\_\_ Department: \_\_\_\_\_

Address: \_\_\_\_\_

P.O. Box: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Company Website: \_\_\_\_\_

**PLEASE INDICATE YOUR ACTIVITIES:**

**Content Creation / Production / Owner**     **Distribution**     **Content Buyer**

<input type="checkbox"/> TV Channel	<input type="checkbox"/> Film	<input type="checkbox"/> Cable / Satellite
<input type="checkbox"/> DVD / Video	<input type="checkbox"/> Inflight	<input type="checkbox"/> Social Networking Sites
<input type="checkbox"/> Mobile / Telecom	<input type="checkbox"/> Online Video / VOD	<input type="checkbox"/> App Store

**Other Services**

<input type="checkbox"/> Dubbing	<input type="checkbox"/> Advertising & Marketing	<input type="checkbox"/> Solution Provider
<input type="checkbox"/> Funding Agency / Investor	<input type="checkbox"/> Government / Association	<input type="checkbox"/> Post Production / Studio
<input type="checkbox"/> Licensing & Merchandising Agency	<input type="checkbox"/> Facilities / Service Provider	<input type="checkbox"/> Others: _____

## PLEASE SELECT YOUR CONTENT GENRE

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Animation            | <input type="checkbox"/> Infotainment                  | <input type="checkbox"/> Arts & Culture         | <input type="checkbox"/> Science & Knowledge  |
| <input type="checkbox"/> Children's Programme | <input type="checkbox"/> Reality Show                  | <input type="checkbox"/> Current Affairs / News | <input type="checkbox"/> Series               |
| <input type="checkbox"/> Comedy               | <input type="checkbox"/> Satellite TV / Cable TV       | <input type="checkbox"/> Documentary            | <input type="checkbox"/> Short film           |
| <input type="checkbox"/> Docu-Drama           | <input type="checkbox"/> Soap Oprah(s)                 | <input type="checkbox"/> Edutainment            | <input type="checkbox"/> Telenovelas / Sitcom |
| <input type="checkbox"/> Drama                | <input type="checkbox"/> Sport                         | <input type="checkbox"/> Interactive            | <input type="checkbox"/> TV Game Show         |
| <input type="checkbox"/> Family Entertainment | <input type="checkbox"/> Travel / Lifestyle /Adventure | <input type="checkbox"/> High Definition        | <input type="checkbox"/> Nature & Wildlife    |
| <input type="checkbox"/> Formats              | <input type="checkbox"/> Music                         | <input type="checkbox"/> 3D                     | <input type="checkbox"/> Books                |
| <input type="checkbox"/> Action               | <input type="checkbox"/> Health                        | <input type="checkbox"/> History                | <input type="checkbox"/> Others _____         |

## Are you interested in exhibiting at MYCONTENT Show 2012?

- Yes  No

## How did you hear about MYCONTENT Show?

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Email              | <input type="checkbox"/> Exhibitor        | <input type="checkbox"/> Press Release / Magazine Article |
| <input type="checkbox"/> Colleague / Friend | <input type="checkbox"/> Phone Call       | <input type="checkbox"/> Advertisement                    |
| <input type="checkbox"/> Flyer              | <input type="checkbox"/> Official Website | <input type="checkbox"/> Internet Browsing / Research     |

## What level of responsibility do you have for buying content?

- Direct / Final Decision  Influence  None

## Approx. how much will your company spend on content acquisition in the next 12 months:

Please select one option

- Up to \$50,000
- \$50,001 to \$100,000
- \$100,001 to \$300,000
- \$300,001 to \$500,000
- \$500,001 to \$1 million
- Other (please specify): \_\_\_\_\_

In Conjunction With



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