



IPM Trade Show

Essen, Germany | January 26-29, 2016

EXHIBIT IN THE SUSTA PAVILION AT IPM ESSEN

PRODUCTS OF INTEREST

Suitable products include, but are not limited to:

Cut Flowers ● Starter Plants ● Shrubs ● Nursery Plants ● Trees ● Seeds

View the show organizer's 2015 Post Show Report

WHY IPM ESSEN?

The **international trade fair for plants** (IPM) is the world's leading horticultural trade fair. This specialist fair offers a look at the entire market value chain for plants: production, technology, floristry, garden features and point of sale. With 43% of visitors from outside of Germany in 2015 (and an expected increase in 2016), it is an opportunity to expand contacts internationally, not just within Germany itself.

Here you can learn more about important horticultural markets, expose your products to the nursery trade in Europe, and develop lasting trade relationships with international industry leaders.

Read the full <u>GAIN Report</u> for in-depth market and regulatory information on Germany.

SUSTA PARTICIPANTS:

- Participation Fee: \$975
- Participation fee includes a 6sq. meter booth as well as:
 - Shared areas, furnishings, and interpreters available in the U.S. pavilion
 - Discounted hotel rates available if you book before December 1, 2015
- Deadline for registration: October 1, 2015
- **Cancellation Date: October 20, 2015** (no refunds for cancellations after this date)
- Travel and accommodations responsibility of company *

* SUSTA'S BRAND PROMOTION:

Travel and accommodations for two company representatives may be eligible for 50% reimbursement through SUSTA's Brand Promotion program.

What other expenses are eligible?

Who can register?

Companies pre-qualified for the 2016 International Marketing Program. Not pre-qualified? Sign in Not sure? Email events@susta.org

How to register?

Fill out the 3 forms below this document:

- 1. Participation Agreement
- 2. Registration Invoice
- 3. Credit Card Authorization Email to: events@susta.org or Fax: (504)568-6010

Questions?Contact Event Managers:

Marisol Alvares
Florida Department of Agriculture
(850) 617-7329

Marisol.Alvares@freshfromflorda.com

John Hammond North Carolina Department of Agriculture (919) 707-3160

john.hammond@ncagr.gov

Funding for SUSTA's Market Access Programs provided by:



Company Name:

SUSTA 2016 Participation Agreement

IPM ESSEN, 6EU16, JANUARY 26-20

Thank you for your interest in the IPM Essen 2016. Below you will find the terms and conditions of this activity accompanied by a registration invoice. Please read the terms and conditions carefully. To complete registration, fill out the information below and return this form and the invoice along with your payment to the Southern United States Trade Association.

Contact Name:	
Please initial each statement: I certify that my company is a registered business in the I certify that my product(s) or ingredients(s) are grown I certify that my company will promote product(s) that packaging) at this event? I certify that my company is small by SBA standards I certify that I have read the SUSTA Event Registration of the statement in the sustainable of the statement in the statement	in the U.S. is at least 50% U.S. origin (excluding added water and
Participant Terms and Conditions	
Participation Fee: \$975. No refunds for cancellations after	er October 1st, 2015.
 Discounted hotel rates available if you book before Booth space is 6 sq. meters within the U.S. pavilic services. 	re December 1, 2015 on. Also included are booth furnishings and interpreters
Company Evaluation	
Participation in our Generic activities requires each comp completed directly following the activity; the second eva aggregate statistical reporting purposes only. Your feedback effective this activity is in assisting you in your exporting effor as business confidential unless otherwise indicated. SUSTA use evaluations. I understand that I am responsible for completing	aluation six months later. Company data is collected for assists SUSTA to plan future promotions and evaluate how orts. Proprietary information provided is always maintained uses an independent consultant firm to assist with six-month
Signature:	
Consequences The U.S. Foreign Agricultural Service maintains strict regularly audits us for compliance. Therefore, SUSTA a reserve the right to ask you to remove any products for otherwise against FAS policy. We also reserve the right company from participating in any future activities.	nd State Department of Agriculture Activity Managers rom the exhibition space that are not of U.S. origin or
Print Name: Title:	Signature: Date:
TILIC.	Date.



COMPANY NAME :	
CONTACT NAME:	TITLE:
PHYSICAL ADDRESS:	CITY:
STATE:	ZIP CODE:
PHONE:	FAX:
EMAIL:	WEBSITE:
Activity Name: 2016 IPM ESSEN	Activity Number: 6EU16
Company Description:	
Company Size:	
Date Established:	
Annual Sales:	
Total Value of Exports:	
Products:	
Current Export Markets:	
By submitting this form, I understand that an Activity Manager. Name (print): Date:	at I am committing to participate in the SUSTA activity and will be contacted by Signature: Title:
I will be paying by: ☐ Check ☐ Credit Ca	hern U.S. Trade Association. Mail check with Participation Agreement and this

Paying By Credit Card:

Please complete the attached One-time Credit Card Authorization Form and email the Participation Agreement, Registration Invoice and Credit Card Authorization to events@susta.org or fax to 504-568-6010 or mail to the address above.

All statements made in this application are subject to investigation. Any false or dishonest answer to any question may be grounds for denial or subsequent revocation. SUSTA retains the sole and exclusive authority to reject applicants if, in the sole opinion of SUSTA, it does not comply with MAP or FAS regulations, any laws of the United States, if there is an outstanding question regarding its validity, or otherwise not deemed in accordance with its construction of its purpose. SUSTA does not discriminate in its programs on the basis of race, color, national origin, sex, religion, age, political beliefs, or marital/family status.

Company Name:	Date:
	authorize the Southern United States Trade Association to charge on my credit (U.S. Dollars)
CREDIT CARD INFORMATION	
Credit Card Type: (Please circle one)	MasterCard Visa Amex Discover
Credit Card Number:	
Expiration Date:	/
	(Month) (Year)
Security Code:	(AMEX 4 Digit on Front of Card; MC/VISA/DISC 3 Digit on Back of Card)
Cardholder's Name: (EXACTLY as it appears on the Card)	
Billing Address:	
billing Address.	(Street Address or P.O. Box)
	(other hadress of the box)
City / State:	/
City / State:	(City) (State)
City / State: Zip Code:	
Zip Code:	
Zip Code:	(City) (State)
Zip Code: Signature of Cardholder:	(City) (State)
Zip Code: Signature of Cardholder:	(City) (State)
Zip Code: Signature of Cardholder:	(City) (State)
Zip Code: Signature of Cardholder:	(City) (State)
Zip Code: Signature of Cardholder:	(City) (State)
Zip Code: Signature of Cardholder: PLEASE FAX For SUSTA internal use only:	(City) (State)
Zip Code: Signature of Cardholder: PLEASE FAX For SUSTA internal use only:	(City) (State) (TO: (504) 568-6010 or EMAIL TO: events@susta.org
Zip Code: Signature of Cardholder: PLEASE FAX For SUSTA internal use only: Company Name:	(City) (State) (TO: (504) 568-6010 or EMAIL TO: events@susta.org Reconciliation:

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