**27/04/2022**

**DECLARATION OF INTEREST FORM**

**For the project: Business Development Training and Support for Non-native Small Business Owners - “Enter 4 All”**

|  |  |
| --- | --- |
| **Company name:** |  |
| **Company Registration No (AFM):** |  |
| **Name of Legal Representative:** |  |
| **Company type and activity:** |  |
| **Business Address:** |  |
| **Contact Information (e-mail & phone number):** |  |
| **I consent to be contacted by a representative of ‘Enter 4 All’ regarding potential participation in the Project’s activities** | **Yes** |
| **Name & Signature:** |  |

Please return the form to: [customerservice@stratigon.gr](mailto:customerservice@stratigon.gr)