

 **QUESTIONNAIRE**

**for Potential TEXHA POWER Affiliates**

|  |  |  |
| --- | --- | --- |
| 1. | First name |  |
| 2. | Last name |  |
| 3. | E-mail |  |
| 4. | Telephone |  |
| 5. | Country |  |
| 6. | Company name |  |
| 7. | Industry |  |
| 8. | Official position |  |
| 9. | Brief summary about yourself |  |

\*Please, send the completed questionnaire to market@texha.com