

Inventors Corner Corporate Profile Questionnaire



IT'S **SMART**

Dear Inventor/Prospective Exhibitor:

Thank you for your interest in exhibiting in the 2019 International Home + Housewares Show®. To receive an official Booth Space Application/Contract, your company must be either an IHA-approved consumer-end home or housewares product manufacturer/inventor.

To exhibit in the 2019 Show, please complete this Questionnaire as soon as possible and include the following:

- 1) Company biography or company history. (We would like to know more about your company. Tell us your story.)
- 2) **Original** catalog sheets/product images showing the products you intend to display. Make sure these catalog sheets include the name of your company.

For more information, visit our website at: www.housewares.org/Show/faq_exhibitors.aspx

1 Where is/are your product(s) manufactured?
 State/Province: _____ Country: _____
 State/Province: _____ Country: _____
 State/Province: _____ Country: _____

2 How many full-time individuals does your company employ?
 _____ (enter the number of employees)

3 How many years has your company been selling home products?
 _____ years

4 Has your company ever exhibited in the International Home + Housewares Show? Yes No
 If yes, please explain: _____

5 Is/are your product(s) currently being featured by an exhibitor at the International Home + Housewares Show? Yes No
 If yes, by which company? _____
 What is your company's relationship to this company? _____

6 Is your company legally affiliated with any companies currently exhibiting in the International Home + Housewares Show? Yes No
 If yes, please explain: _____

7 Please list other trade shows, in order of importance, in which your company participates:
 1. _____
 2. _____
 3. _____

8 Is/are the product(s) you wish to exhibit intended for the:
 Consumer Market? (sell to retailers) Yes No
 Commercial Market? (sell to hotels and restaurants) Yes No
 If both, please explain: _____

9 Do you have the ability to fulfill orders at this time/are your products ready for shipment? Yes No*
 If product is not ready, do you have a target date?

10 Is/are your invention/design(s) new to the home products and housewares industry? Yes No

11 Does your company have its own brand that you license or market?
 Yes No If yes, please list your brand name(s) or license(s):

12 Do you license your brand name(s) to other companies? Yes No
 If yes, indicate companies to whom you license: _____

13 The invention/design(s) your company intends to exhibit belongs to the following category groups (in percent).

- | | |
|--|---|
| <input type="checkbox"/> As Seen On TV | <input type="checkbox"/> Home Healthcare |
| <input type="checkbox"/> Bath + Shower Accessories | <input type="checkbox"/> Home Security |
| <input type="checkbox"/> Children's Accessories | <input type="checkbox"/> Home Textiles |
| <input type="checkbox"/> China, Crystal & Silver | <input type="checkbox"/> Household Electrics |
| <input type="checkbox"/> Cleaning | <input type="checkbox"/> Kitchen Tools + Accessories |
| <input type="checkbox"/> Cook + Bakeware | <input type="checkbox"/> Lighting |
| <input type="checkbox"/> Cookbooks | <input type="checkbox"/> Luggage |
| <input type="checkbox"/> Closeouts | <input type="checkbox"/> Made in USA |
| <input type="checkbox"/> Electrics (Kitchen) | <input type="checkbox"/> Major Appliances |
| <input type="checkbox"/> Fitness | <input type="checkbox"/> Outdoor Living |
| <input type="checkbox"/> Floor + Carpet Care | <input type="checkbox"/> Personal Care (Electrics) |
| <input type="checkbox"/> Furniture | <input type="checkbox"/> Personal Care (Non-Electrics) |
| <input type="checkbox"/> General Merchandise/Impulse | <input type="checkbox"/> Pet Supplies |
| <input type="checkbox"/> Giftware | <input type="checkbox"/> Retail Promotions + Continuities |
| <input type="checkbox"/> Gourmet Food + Specialty Products | <input type="checkbox"/> Seasonal Products |
| <input type="checkbox"/> Hardware | <input type="checkbox"/> Space Organization + Clothing Care |
| <input type="checkbox"/> Home Décor | <input type="checkbox"/> Sustainable Products |
| <input type="checkbox"/> _____ Indoor _____ Outdoor | <input type="checkbox"/> Tabletop |
| <input type="checkbox"/> Home Environment (air/water) | <input type="checkbox"/> Technology Accessories |
| | <input type="checkbox"/> Other _____ |

- 14 Is your company new to the U.S. Market? Yes No
- 15 Please indicate below what channels you sell through or are looking to sell through.
- | | |
|--|---|
| <input type="checkbox"/> Mass Merchant/Chain (<i>Target, Wal-Mart, ShopKo</i>) | <input type="checkbox"/> Hardware/Home Centers (<i>Ace, True Value, Home Depot, Lowe's</i>) |
| <input type="checkbox"/> Department Store (<i>Sears, Macy's, JC Penney, Kohl's</i>) | <input type="checkbox"/> Gourmet Food Store |
| <input type="checkbox"/> Drug/Supermarket/Convenience Store | <input type="checkbox"/> Museum Stores |
| <input type="checkbox"/> Hotel/Restaurant/Caterer/Cooking School | <input type="checkbox"/> Non-Store/Catalogue (<i>HSN, QVC, Lillian Vernon, Frontgate</i>) |
| <input type="checkbox"/> Gift Store | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Home Furnishing/Appliance/Electronics (<i>Best Buy, hhgregg, Fry's</i>) | <input type="checkbox"/> Warehouse Club |
| <input type="checkbox"/> Multi-Store Specialty (<i>Bed Bath & Beyond, Williams Sonoma, Sur La Table</i>) | <input type="checkbox"/> Variety/One-Price (<i>Dollar General, Big Lots</i>) |
| | <input type="checkbox"/> Independent Specialty |
| | <input type="checkbox"/> Garden/Patio Store |
| | <input type="checkbox"/> Wholesaler/Distributor |
| | <input type="checkbox"/> Other _____ |

- 16 What is your company's objective at the Show/Who do you want to meet with? Meet with retailers Meet with distributors
 Meet with other exhibitors Meet with Media

- 17 Please list the names of your current key retail customers:
- Contact at Company: _____
 Company Name: _____
 City: _____ State: _____ Country: _____
- Contact at Company: _____
 Company Name: _____
 City: _____ State: _____ Country: _____
- Contact at Company: _____
 Company Name: _____
 City: _____ State: _____ Country: _____

- 18 Does your company currently have distribution capabilities in the U.S.?
 Yes No

- 19 Is your company: Privately Held? Publicly Held?
- If your company has multiple company names, please indicate below:
 1) _____
 2) _____
 3) _____

- 20 How did you hear about the International Home + Housewares Show?

- 21 Please designate a full time employee of your company as your "Trade Show contact":
 Name: _____
 Trade Show contact E-mail: _____
 Trade Show contact phone number: _____

- 22 I understand that 100% of the booth space rented from IHA must be occupied by housewares consumer-end products approved by IHA. Catalog sheets/product images of all products that we wish to exhibit must be submitted to IHA for approval.

Title: _____
 Signature: _____ Date: _____

This form was completed by: Mr. Ms. Mrs. Miss
 Name: _____
 Title: _____
 Company: _____
 Address: _____
 City: _____ State/Province: _____
 Zip/Postal Code: _____ Country: _____
 Telephone: _____ Fax: _____
 Toll-free Telephone: _____
 Company E-mail: _____
 Website: _____
 Our Corporate Address is located in: _____
Country

IHA respectfully requests that you authorize us and our affiliates to fax or email your organization materials regarding member and Show services that may be of an informational or commercial nature. By signing this form and providing your fax number, you expressly consent to receiving fax and email communications promoting the commercial availability or quality of any events, goods or services sent by or on behalf of IHA, and you certify that you have the authority to give such consent for your organization. Thank you.

Please contact Ginny Costello at gcostello@housewares.org or fax to +1 847-292-4211



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