**学 员 报 名 表**

**REGISTRATION FORM**

|  |  |
| --- | --- |
| Name of the seminar/training course项目名称 |  |
| training Date培训地点 |  | Host City培训地点 |  |
| Photo照片 | Family name姓 |  |
| First name名 |  |
| Position职务 |  |
| Passport No. 护照号码 |  |
| Nationality国籍 |  | Name of institute工作单位名称 |  |
| Sex性别 |  |
| Religion宗教 |  |
| Food abstention饮食禁忌 |  |  Address of Home家庭住址 |  |
| Date of Birth生日 |  |
| Tel电话 |  | E-mail |  |
| Fax传真 |  | Person to be contactedin emergency应急联络人 |  |
| Cell手机 |  | Phone to be contactedin emergency 应急电话 |  |
| Personal Signature 本人签字：  |

**经商参处签章：**

**日期：**