

REGISTRATION FORM
Business & Trade Mission to China

1. PARTICIPANT INFORMATION

Mr./Ms.: _____
(First) (Middle) (Last)

Title/Position _____

Company/Organization: _____

Address: _____

City: _____ State: _____ Zip _____

Contact Phone: (____) _____ Fax: (____) _____

Email: _____ Website: _____

2. BUSINESS INFORMATION and INTERESTS

Product(s)/Service(s): _____

Your interest in China (Please check the appropriate box(s) and attach separate sheets if needed):

- | | |
|--|--|
| <input type="checkbox"/> Export | <input type="checkbox"/> Joint venture operation |
| <input type="checkbox"/> Import | <input type="checkbox"/> Wholly-owned operation |
| <input type="checkbox"/> Distribution | <input type="checkbox"/> Outsourcing / Co-production |
| <input type="checkbox"/> Service | <input type="checkbox"/> Set-up of rep office or branch |
| <input type="checkbox"/> OTHER (Please specify) | |

3. INTERNATIONAL AIRFARE RESERVATION

I will make my own reservation Please make the reservation for me

4. METHOD OF PAYMENT

Total participation cost: \$ _____. Please make **CHECKS** payable to: Jinshui Zhang, and mail to:

New York State Small Business Development Center
State University Plaza, 22 Corporate Woods, 3rd Floor
Albany, N.Y. 12246- 0001

5. SIGNATURE

Participant Signature: _____ Date: _____