



Conference Registration
2006 Business Chinese Workshop

Please Print Clearly and Fax
Completed Form to the CIBE office:
734.936.1721

Full Name (English):

Full Name (Chinese):

Affiliation:

Address:

Phone:

Fax:

Email:

Gender:

Smoking Preference:

Can you share rooms with a participant?

Any suggestions expectations or requests?

Continue only if you have a presentation:

Title:

Language:

Technical Support Needs: