**Registration Form**

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| --- |
|  **Please fill out this form and send to zhangyf@hse.cncic.cn**  |
| **Company Name** |  |
| Name | Position  | Tel | Email |
|  |  |  |  |
|  |  |  |  |

* **Your Feedback：**

**Note:** We will summarize the feedback from companies and submit to MEP-SCC together**.**

**Webinar Contact：**

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Product Registration and Compliance Department of CNCIC