

**HOUSTON INTERNATIONAL EXPO 休士頓國際博覽會****INTERNATIONAL BUSINESS REGISTRATION FORM**

Please fill out form and either email it to us with your payment information  
to [JENNIFER@SCDAILY.COM](mailto:JENNIFER@SCDAILY.COM) or mail your payment to the International Trade Center  
c/o Houston International Expo  
11110 Bellaire Blvd., Suite 200, Houston, TX 77072

Today's Date 日期:	Office Phone:	Alternate Phone:	Fax:
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**INFORMATION**

- Mr. 先生                      Name:
- Mrs. 女士

Company Name 公司名稱:

Address 地址:

City 城市:

State 州:

Zip 郵編:

Website 網站:

Email:

Do you have any special needs you would like us to know about?

若有特別需求請告知:

**TELL US ABOUT YOUR COMPANY 公司資訊**

How many employees work for your organization? 公司員工數:

**What markets do you serve? 主要經營的市場 (可複選)**

- |                      |                        |                                      |
|----------------------|------------------------|--------------------------------------|
| 1. Africa 非洲         | 2. North Africa 北非     | 3. Asia 亞洲                           |
| 4. North America 北美洲 | 5. Central America 中美洲 | 6. South America 南美洲                 |
| 7. Caribbean 加勒比海    | 8. North Africa 北非     | 9. Middle East Sub-Saharan 中東撒哈拉以南地區 |

My company is a 公司屬性 Manufacturer 製造業      Wholesaler 批發商      Service Provider 服務業      Other

What types of products or services does your firm offer? 公司產品名稱或服務項目

Have you exported before? 曾經出口過嗎?      Yes      No      What Country 國名?

**PAYMENT INFORMATION COST PER PERSON \$3,000 付款方式, 每人3千美元****Please register me for the following: 請向我們登記, 有意參加以下的各項活動**

All Expo activities: Expo, Seminar, Gala &amp; B2B 所有工商活動: 工商展、座談會、宴會、商業對接

1. Invitation Letter 邀請函
2. Breakfast, Lunch & dinner 早、中、晚餐
3. Ground local transportation 地面交通
4. 2-night hotel accommodation 二晚旅館住宿
5. Group Sightseeing 觀光旅遊

**NOTE\* \$1,000 handling fees are non-refundable for guest who register and don't have an approved VISA 海外**  
**廠商請注意: 若因簽證問題無法出席, 將有1千美元手續費無法退還。**

**WIRE TRANSFER INFORMATION 付款方式**

Payment via    Credit card    Visa    Master card    American Express    Discover

Credit card number:

Expiration Date:

Security Code:

I authorize my credit card to be charged for the amount committed above. I understand that I am financially responsible for any balance due. 我授權信用卡公司收取以上費用, 已經本人同意。

Authorized Signature 授權者簽名:

Print Name 正楷名字:

Date 日期:

