

Application Form			
	Applica	ant Informa	ation
Company Name:			
Email Phone Website			
Speaker:			Job title:
Are you a CICC Memb	oer?	<b>NO</b>	Membership Level: Supporting / Ordinary
If NO, please indicate with the CICC	your relation		
You apply for:	Speaker 🗌	<b>Other</b> Please s	pecify
Topic chosen:			
Speech Title:			
Speech length:			
Speech language:			

References				
YES NO Have you been one of our speakers before?				
If yes, please mention on which occasion:				
Attachment				
CV Speaker:  YES NO  Notes:				
Speech content & PPT presentation YES NO Notes:				
Disclaimer and Signature				
I certify that the information submitted are true and complete.				
Signature: Date:				
The information about the tendering result shall be announced on the CICC website.				

## THANKYOU FORYOUR SUPPORT

## CAMERA DI COMMERCIO ITALIANA IN CINA

CHINA - ITALY CHAMBER OF COMMERCE

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