**附件：会议回执**

**Registration Form**

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| --- | --- | --- | --- |
| 姓名Name |  | 性别Gender |  |
| 工作单位Institutional Affiliation |  |
| 职务/职称Rank/Title |  |
| 通讯地址Address |  | 邮编Postcode |  |
| 联系电话Contract Number | 手机： 固话：Mobile Phone:   Fixed Telephone: |
| 电子邮箱Email |  | 传真Fax |  |
| 拟住宿时间（请勾选）Nights of Stay | 11月29日Nov.29 night11月30日Nov.30 night |
| 论文题目(中英双语）Title of Paper |  | 论文语言The Language in Your Paper | 中文 Chinese英文 English |

注: 报名参会请于2019年10月30日前将回执发送到会务邮箱ygaheforum@163.com。

Please return the completed form before October 30, 2019, by emailing to the following email address : ygaheforum@163.com.