



ASPF2010 Registration form

Reg.No _____
Date Rcvd. _____

Name: Prof./Dr./Mr./Ms _____
 (Family Name) (First Name) (Middle Name)

Affiliation: _____

Mailing Address: _____

Zip Code: _____ Country: _____

Phone: _____ Fax: _____

E-mail: _____

◆ Registration

	Early Registration (Until October 01.)	Late & On-site
<input type="checkbox"/> Foreign Nationality	JPY 40,000	JPY 50,000
<input type="checkbox"/> Japanese	JPY 30,000	JPY 40,000

◆ Banquet / Tour / Other

Do you attend the banquet? [25.Oct] Yes No

Do you attend the technical visits tour? [27.Oct] Yes No

Do you request a vegetarian meal? Yes No

◆ Accommodations

	Name of the Hotel	Room Type	Check-in Date	Check-out Date	Total Night(s)
1 st Choice					
2 nd Choice					

Sharing with: Mr./Ms _____
 (Family Name) (First Name) (Middle Name)

◆ Way of Payment (Please check the appropriate box.)

1. Credit Card

Visa MasterCard AMEX Diners JCB Other ()

Card No:

Name of Cardholder: _____ Expiration Date: _____

Authorized Signature: _____ Home Phone: _____

2. Payment through Bank *Please attach the copy of receipt.

I have sent the Registration fee and Accommodations Deposit on (Date) _____

through (Name of Bank) _____ to the following account in Japanese yen.

Name of Bank: The Bank of Tokyo-Mitsubishi UFJ Branch: Imaike Branch Swift code: BOTKJPJT
 Account No: (ordinary account) 0131342 Name of Account: Kinki Nippon Tourist Co., Ltd.

ASPF2010 Registration Desk
 KINKI NIPPON TOURIST CO., LTD. Event & Convention, Nagoya
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