

REGISTRATION & ACCOMODATION FORM XXIX PHYSICS IN COLLISION

Application Deadline: Friday, Jul 31, 2009

Physics In collision Conference Desk

Kinki Nippon Tourist Co., Ltd. (KNT), Event & Convention, Kansai

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All columns marked with (*) must be filled in.

Name (*)	Title (Please tick in <input type="checkbox"/>) <input type="checkbox"/> Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.		
	Given Name	Family Name	
Job title			Nationality (*)
Institute (*)			
Mailing address(*)	<input type="checkbox"/> Office <input type="checkbox"/> Home (Please tick in <input type="checkbox"/>)		
Address (*)			
ZIP Code (*)		Country (*)	
Phone (*)		Fax:	
E-mail (*)			

Registration Fee (*) (Please tick in <input type="checkbox"/>)
<input type="checkbox"/> participant 20,000 JPY <input type="checkbox"/> accompanied person (number of person _____) 8,000 JPY/person
Total _____JPY (*)

Hotel Accommodations *Name of the other guest must be filled in if you stay in a twin room.							
Hotel Code	Kobe Tokyu Inn: 1-S (single) 1-T (twin)		1*2*3 Hotel: 2-S	Sanside Hotel: 3-S			
1st choice hotel code	2nd choice hotel code	Arrival date	# of night(s)				
Name of the other guest to share a twin room	Title (Please tick in <input type="checkbox"/>) <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.						
	Given Name	Family Name					
Deposit	Full hotel deposit and handling charge per room 500JPY					Total _____JPY	

Payment * Please charge the above amount to my credit card.							
Credit card	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/> Diners <input type="checkbox"/> JCB						
Card number	Expiration date		Month	Year			
Holder's name							

Date: _____

Signature: _____