

Fax : +81-86-224-3425

Robomec2011 Registration Form

Deadline: April, 15, 2011

Please TYPE-IN followings

Title; Prof/ Dr/Mr/Mrs/Miss/Ms Family name

Given name ;

Department ;

Institute ;

Address ;

Zip code ;

Country ;

Telephone :

Facsimile ;

e-mail :

Accompanying person(s)

Name : Dr/.Mr./Ms.

Family Name

Given Name

Middle Name

Name ; Dr/.Mr./Ms.

Family Name

Given Name

Middle Name

Registration

- | | |
|--|---------|
| <input type="checkbox"/> General Member of the Japan Society of Mechanical Engineering | ¥15,000 |
| <input type="checkbox"/> Student Member of the Japan Society of Mechanical Engineering | ¥8,000 |
| <input type="checkbox"/> Non-Member | ¥20,000 |
| <input type="checkbox"/> Student Non-Member | ¥10,000 |

Banquet on May 27

- | | |
|--|--------|
| <input type="checkbox"/> General Participant | ¥5,000 |
| <input type="checkbox"/> Student | ¥3,000 |
| <input type="checkbox"/> Nonparticipation | - |

Fee for Paper Submission

Number of your paper you will present on "Robomec2011".

- | | | | | | |
|--------------------------|-----|--------|--------------------------|-------|---------|
| <input type="checkbox"/> | One | ¥0 | <input type="checkbox"/> | Three | ¥16,000 |
| <input type="checkbox"/> | Two | ¥8,000 | <input type="checkbox"/> | Four | ¥24,000 |

Payment

- ☐ Credit Card (Please fill in the ALL Folowing blanks) ☐ Bank Transfer

- ☐ Visa Card ☐ Master Card ☐ American Express ☐ Diners Club ☐ JCB

Card No.

Good Thru.

Month	Year
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Amount

Name of Holder

Date

Signature

Please fill out the area within the bold lines in block letters. This will be deemed invalid if the part of amount is altered in any way.

Registration and Hotel Rereavation Secretariat
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Okayama Branch
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