SSS'15 Advanced Registration Form

- E-mail or Fax to: Akinori HIDAKA, SSS'15 Secretary, E-mail: $sss15@sci\text{-}sss.org, Fax: +81\cdot 49\cdot 296\cdot 6403$

Correspo	nding	Address									
Γitle							ı resident in Jap	an, please give	your A	ddress (and Name) also in
Name						Japanese)					
Address											
Phone											
FAX											
E-mail											
Registra	tions										
Registrants	Title	Nam	e		Affiliation		Reg	istration Cate	gory	Fee	Э
1											JP
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Options		4 in included in 111	4hi						Ļ		
Note: One bar	iquet ticke	t is included in all Extra Band		categories above.	7,000JP	Y each X	Quantity:		=		JP
								Subtotal of op	otions:		JP'
Γο partic	pants	of banquet						_			
Do you have any food restrictions?							(if YES, please detail your restriction)				
Payment	;										
Select your pa		thod									
Please fill in t	he followi	ng blanks (bank in	formation):					1			
Amount of remittance								JPY			
		aypal account id)									
Completed or	expected o	late of remittance									
Please fill in t	he followi	ng blanks (VISA ca	rd information)	:				1			
	ardholder's										
	Credit Care										
(МЕМО)	tion Date (i	nonth/year)									