

## Registration and Application for Hotel Accommodation

**MR2008 US-Japan Magnetic Reconnection Workshop  
 Zanpamisaki Royal Hotel, Japan, Mar 3 - 6, 2008**

*\* Please forward this form to M. Inomoto, Osaka University by fax (+81-6-6879-7916).*

Family Name : \_\_\_\_\_  
 First Name : \_\_\_\_\_  
 Gender : Male / Female                      Nationality : \_\_\_\_\_  
 Organization : \_\_\_\_\_  
 Phone : \_\_\_\_\_ Fax : \_\_\_\_\_  
 E-mail : \_\_\_\_\_

Will you present your paper?                       Yes                       No

If Yes, title of your paper \_\_\_\_\_  
 \_\_\_\_\_

Do you need the hotel reservation?                       Yes ( recommended )                       No

Hotel Booking :                      *Please select your room requirements from the below.*

Date of check in : \_\_\_\_\_ Date of check out : \_\_\_\_\_

Room Type :     Single                       Double                       Triple

Hotel Fee : \_\_\_\_\_ yen x \_\_\_\_\_ night(s) x \_\_\_\_\_ person(s) = \_\_\_\_\_ yen (A)

Registration Fee \_\_\_\_\_ yen x \_\_\_\_\_ person(s) (Symposium Attendants = \_\_\_\_\_ yen (B)

Total Amount                      (A) + (B)                      = \_\_\_\_\_ yen

	Single	Double	Triple
Zanpamisaki Royal Hotel	@20,000 yen	@14,000 yen/person	@12,000 yen/person

\* Hotel fee includes breakfast, dinner, tax and service charge

	Regular	Student
Registration Fee	@30,000 yen	@15,000 yen

VISA Card     Master Card     American Express     Diners Card     JCB

Account No.                          Amount     ¥

Expiry Date : \_\_\_\_\_                      (Japanese yen amount)

Name of Holder : \_\_\_\_\_

Signature : \_\_\_\_\_                      Date : \_\_\_\_\_

**Please return this form by fax BEFORE Jan. 10 to:**

**M. Inomoto (in charge of MR2008)**  
**CAMT, Osaka University**  
**e-mail : mr2008@ppl.eng.osaka-u.ac.jp, FAX : +81-6-6879-7916**