

You can print out this form and send your registration via facsimile (+81-774-38-4336).

Hazards 2000 Registration Form

| | |
|------------------------|---------------------------|
| Name | (Prof. / Dr. / Mr. / Ms.) |
| Organization | |
| Address | |
| Telephone | |
| Facsimile | |
| E-mail | |
| NHS Member (Yes / No) | |
| Accompanying person(s) | |

Conference Fee and Payment (Please check in .)

Symposium Participants:

| | | |
|-------------|-----------|----------------------------------|
| NHS members | 30,000yen | (Before April 1, 2000) |
| | 33,000yen | (After April 1, 2000 or On-Site) |
| All Others | 33,000yen | (Before April 1, 2000) |
| | 36,000yen | (After April 1, 2000 or On-Site) |

Accompanying Persons :

| | |
|-------------|-----------|
| NHS members | 10,000yen |
| All Others | 11,000yen |

TOTAL _____yen

I will pay by credit card.

VISA Master Card

| | |
|---------------------|-------|
| Card Number: | _____ |
| Expiry Date: | _____ |
| Card Holder's Name: | _____ |
| Signature: | _____ |

Date: _____ Signature: _____

Please return the completed registration form via facsimile to:

Toyoko Shimizu, Hazards 2000 Secretariat
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Tel : +81-774-38-4273 **Fax : +81-774-38-4336** E-mail : shimizu@drs.dpri.kyoto-u.ac.jp