

STAC-11 Registration form

Please save this form to your disk, fill it with all necessary information, attach it to Email [and submit it to <STAC11-registration@ml.nims.go.jp>](mailto:STAC11-registration@ml.nims.go.jp).

* Required item

Please use Adobe Acrobat to fill this form; **please do not use Microsoft-Edge to fill this form.**

Name	Family *		
	First *		
	Middle initial		
Affiliation	Institution *		No abbreviation
	Department		No abbreviation
	Institution * (Abbreviation)		For badge
	Department (Abbreviation)		
	Building, Room		
	Street address *		
	City *		
	ZIP *		
	Country/Region *		
	Phone		
	FAX		
	Email *		
Fee	Registration *		Rate is finally determined by the date of bank-transfer. Student must show ID at registration desk in the conference site..
	Banquet *		
Remark			

File name=your name.