Registration Form

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| --- | --- |
| Full Name |  |
| Type | CSIG member 🞏（No: ）Student🞏 Non-CSIG member 🞏 |
| Article No.Article title |  |
| School/Company |  |
| Tel 1 |  | Tel 2 |  |
| Address and E-mail |  |
| Amount of remittance |  |
| Bank name & address |  |
| Remitter's name |  | Date of remittance |  |
| Invoice requirement | Registration fee 🞏Conference fee 🞏其他（请填写）  |
| Invoice recipient name |  |
| Hotel arrangement | Do not need arrangement 🞏 (if yes, please pass the following content)Book the hotel designated by the conference:Room: Standard room with queen-size bed 🞏 Standard double room 🞏Check-in date: September , 2017Check-out date: September , 2017Notes:1. Price: Standard room with queen-size bed: 550 RMB/room/day (including 1 breakfast)Standard double room: 500 RMB/room/day (including 2 breakfast)
2. Please pay directly the hotel and ask for invoice.
3. The organizer will contact with you soon to confirm the booking information.
4. To ensure the booking, the organizer has signed the guarantee agreement with the hotel. Please make sure you need the room before booking.
5. As there are limited number of rooms, please submit your booking information early. The organizer can not guarantee there are rooms available for all applicants.
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| Remarks |  |