

Please fill out the form with BLOCK letters and return it back via fax or email to:

17th SEAGC Conference Secretariat, Ms. Lin

Tel: +886-2738-3411 | Fax: +886-2737-6994 | Email: tgs@mail.ntust.edu.tw

(For staff use only.)

Reg. No. : _____

RCVD Date: _____

*Please be noted that the special rate for domestic students does **NOT** include the conference kit, Lunches nor Coffee Breaks, **only a Badge** with Access to the Conference Venue is provided.

*The special rate for domestic student is offered on the "first-come first serve base" with the limitation of **80** registrants.

*Registration as Students must be accompanied with a proof of status, kindly provide the copy of student ID (**Front/Back**) attached to the above fax/email.

Registrant's Information (Note: one form per registrant)

Mr. Ms.

First Name _____ Family Name _____

Institution _____ Student ID _____

Proof of student ID is required on-site

Address _____

Postal code _____ City _____ Country _____

Tel _____ Fax _____ Email _____

Dietary Request None Vegetarian Other _____

Domestic Student Special Rate

NT\$ 500

Payment Method

The total amount of registration fee is NT\$ _____ and will be paid through

Telegraph Transfer payable to:

Account Name: Elite Professional Conference Organizer(艾力得國際會議顧問股份有限公司)

Bank Name: The Shanghai Commercial & Savings Bank, East Taipei Branch (上海商業銀行)

Account No.: 0910-20000-61386

** Please fax the receipt of your telegraph transfer with the English Name on it to +886-2737-6994*

Credit Card : Visa Master JCB

Card Number: _____ - _____ - _____ - _____

Expiration Date(mm/yy): _____ / _____

CVV2 Code: _____ (The last three digits in the signature panel on your card)

Card Issuing Bank: _____ (Please write in BLOCK letters)

Name of Cardholder: _____ (Please write in BLOCK letters)

Authorized Signature: _____

Authorization Code: _____ (for official use only) Date: _____