### **REGISTRATION FORM**

#### Please return this form to:

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The 7th Princess Chulabhorn International Science Congress (PC VII)

Chulabhorn Research Institute, Office of Computer Services 54 Kamphaeng Phet 6 Rd, Lak Si, Bangkok 10210, Thailand Tel: (66-2) 984-8655, 574-0622 ext. 2430 Fax: (66-2) 573-7742 E-mail: pc\_register@cri.or.th

OR you can register online via Website - http://pc.cri.or.th/pc7





#### THE $7^{TH}$ PRINCESS CHULABHORN INTERNATIONAL SCIENCE CONGRESS (PC VII)

Bangkok, THAILAND November 29 – December 3, 2012

	SE CAPITAL LETTERS						
<b>A. PARTI</b> First Name	CIPANI		Middle Nar	ma			
Last Name							
Title/ Profess	sional Title						
University/In	stitution/Company/Ministry						
		Divis					
Mailing Addr	ress						
Postal code		Country					
Telephone _	Telefax		E-mail addr	ess			
B. ACCO	MPANYING PERSON(S) (not a	ttending lectures)					
	• • •	- ,	Last Name_				
2.	First Name		Last Name_				
C. REGIS	STRATION FEES	Payment received by	y Oct. 31, 2012	Payment received after Oct. 31, 2012 and On-site			
	MAIN CONGRESS	US\$		US\$			
	<ul><li>Active Participant</li><li>Accompanying Person</li></ul>	500		600			
	Student	150 200		150 250			
		_··-					
D. ABST	RACT INFORMATION: (Abstra	ct Submission Deadli	ine: September	· 1, 2012)			
I intend to present a poster on the		opic No	(See "List of	(See "List of Topics" in the Abstract Submission Information)			
	Abstract Title:						
	Abstract File Name:						
	Submit by O E-mail	On-line Abstract Subm	nission				
	Please note that the abstract can received by the registration office		he registration fo	orm and <u>full payment</u> of registration fee have been			
E. PAYM	ENT:						
	Active Participant/Student	US\$					
	Accompanying Person(s)						
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	ase pay the total amount to PRINCESS		<b>KATIUN)</b> Dy.				
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Bangkok, THAILAND
November 29 – December 3, 2012

Please use CAPITAI	L LETTERS						
First Name			Last Name				
ACCOMMODATION							
		Flight No		Arrival Time			
Departure from Bangkok/, Flight No							
Number of Rooms: as Single: as Single:		. •		•			
Number of Persons:		-					
Please reserve accommodation for							
Indicate the hotel requested: 1st choice Hotel				` '			` ' '
			Single	Double/	Twin	Extra Bed	
Shangri-La Ho	tel (River View)	Executive	US\$ 198	☐ US\$ 2	210	US\$ 60	
		Deluxe	US\$ 180	US\$ 1		US\$ 60	
Novotel Bangk	ok Fenix Silom	Superior	US\$ 106		106	US\$ 34	
		Standard	US\$ 91		91	US\$ 34	
Holiday Inn Ba	ingkok Silom	Premier	US\$ 100	_	110	US\$ 34	
Cantra Daint C	::I	Superior Charles Delana	US\$ 84		94 🛄	US\$ 34	
Centre Point S	ollom	Studio Deluxe Studio (City View	US\$ 95	=	99 81	US\$ 30 US\$ 30	
Bossotel		Deluxe	US\$ 67		67	US\$ 24	
DOSSOLEI		Superior	US\$ 54	= '	54	US\$ 24	
		Standard	US\$ 48	= :	48	US\$ 24	
Full name	ccommodation [servations through	another travel age	_				
Indicate your choice of h		•		ent.			
TOURS AND EXCUR	RSIONS (Optio	nal)					
Arrangements for opti registration fee for the	e Congress, but ca s. For more infor	an be arranged fo mation, please vis	or an additional fee sit http://pc.cri.or.th	. Reservations man/pc7/tour_excursion	ay be made onlir		
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