

Symposium on “Mapping the Galaxy and Nearby Galaxies” Credit Card Form

26-30 June, 2006

Please fill out this form and send via fax to **+81-3-5562-3666** (Attn: **Ms. Kachi**).

Name: _____

Affiliation: _____

E-mail Address: _____

The registration fee for the symposium includes the admission to the technical sessions, conference reception, banquet, abstract book, proceeding book, and excursion.

We will be able to accept **Visa and Mastercard** credit card transactions for the fee payment. Only Japanese yen is acceptable.

Grand Total _____ **yen**

** See the total amount of your pay in JPY shown in the receipt e-mail from LOC **

I agree to pay the above grand total in Japanese Yen by Credit Card.

MasterCard VISA (**Other Credit Cards are not accepted.)

• Card Number: _____

• Expiry Date: (month) / (year) _____

• Cardholder's Name: _____

• Authorized Signature: _____ Date: _____