

ICO '04 Tokyo

Application form for Hotel Accommodations and Tour

DEADLINE; JUNE 18, 2004

Please type or write in BLOCK LETTERS below;

FAX: +81-3-5495-0685

TITLE Prof. Dr. Mr. Ms.

NAME Family name Given name

NAME :

MAILING ADDRESS :

ADDRESS :

Affiliation

Residence

Telephone number;

Fax number;

HOTEL CHOICE

(1) HOTEL NEW OTANI MAKUHARI

(2) HOTEL THE MANHATTAN

(3) MAKUHARI PRINCE HOTEL

(4) HOTEL FRANCS

(5) HOTEL GREEN TOWER MAKUHARI

(6) TOYOKO INN CHIBA MAKUHARI

NAME OF HOTEL	Period of Stay	Night(s)	Room type Number of rooms	Deposit
1st choice _____	Arrival _____	_____ night(s)	<input type="checkbox"/> Single _____ room(s)	(1 night room charge)
2nd choice _____	Departure _____		<input type="checkbox"/> Twin _____ room(s)	¥ _____ x _____ room(s) (1)
If you share a room, please specify all guest names.		1) _____ 2) _____ 3) _____		
Fuji Film Factory and Hakone Sightseeing		¥5,000 x _____ person(s) = ¥ _____ (2)		
Hakone Hotel Kowakien		Single	<input type="checkbox"/> ¥17,900 x _____ night(s) = ¥ _____ (3)	
Arrival date	July 16	Double	<input type="checkbox"/> ¥19,000 x _____ night(s) = ¥ _____ (3)	
Departure date		Triple	<input type="checkbox"/> ¥25,200 x _____ night(s) = ¥ _____ (3)	

BANK TRANSFER

I have remitted the above total of ¥ _____ [(1)+(2)+(3)] on (date) _____

through (bank name) _____ to the following account;

Name Of The Bank The Bank Of Tokyo Mitsubishi, Shin-Marunouchi Branch

Address Of The Bank 1-4-2, Marunouchi, Chiyoda-Ku, Tokyo 100-0005, Japan

Account Name JTBCorp. (CD101923-290) Account Number 1025740

CREDIT CARD

I will pay the above total of ¥ _____ by the following credit card.

MasterCard Diners Club Visa Card American Express JCB

Card number ; _____ Expiration date ; _____

Card Holder's Name ; _____

Authorized Signature ; _____ Date ; _____

Date;

Signature;