



REGISTRATION FORM (THE 8TH IAEC ASIA-PACIFIC REGIONAL MEETING)

CITY: _____
 Name: _____ Surname: _____
 Position: _____
 Address: _____ Post Code: _____
 Phone: _____ E-mail: _____

Please, indicate in which language you would like to receive written information:

English Korean

Special needs (diets, wheel chairs, etc.)Specify _____

I will arrive the ____ September at ____ to Kimhae / Incheon Airport.
 by plane by train by other means

For those traveling by plane please indicate:

Arrival date and hour, flight number, last city of embark and arrival airport:

Departure date and hour - flight number and company - airport of departure:

Needs hotel reservation for the following nights:

September 13th

September 14th

September 15th

Additional nights at your expense: _____

I will participate at the September 14 th Program	YES <input type="checkbox"/>	NOT <input type="checkbox"/>
I will attend the Welcome dinner on September 14 th	YES <input type="checkbox"/>	NOT <input type="checkbox"/>
I will participate at the September 15 th Program	YES <input type="checkbox"/>	NOT <input type="checkbox"/>

For further information about organizational questions, you may contact:

Ms. Eunjae, Shin(ejshin2848@korea.kr)

Office of Education and Legal Affairs, Changwon, Republic of Korea.

Please, return this form to:
 Office of Education and Legal Affairs, Changwon City, Republic of Korea
 Ms. Eunjae, Shin(ejshin2848@korea.kr)
 TEL. 82-55-225-2406 Fax.225-4704