



Registration Form

1st Symposium on Health GIS

December 1 – 2, 2005
Bangkok, Thailand

Date _____

PLEASE PRINT OR TYPE:

First Name: _____ Last Name: _____

Institution: _____

Mailing Address: _____ City: _____

State/Province: _____ Postal/Zip Code: _____

Country: _____ Email: _____

Telephone (include country code) _____ Fax: _____

	Early (by 30/10/05)	Regular (after 30/10/05)	<input type="checkbox"/>
International Participants:	US \$200	US \$300	<input type="checkbox"/>
AgIT* Member:	US \$160	US \$250	<input type="checkbox"/>
Local Participants:	THB 3,000	THB 4,000	<input type="checkbox"/>
Total Amount Fees			<input type="checkbox"/>

*Association for Geoinformation Technology (AgIT)

**50% discount on Registration fee for students

Abstract Submitted: Yes No

Meal Options: Vegetarian Meals Non-vegetarian Meals Muslim

Method of Payment:

I have enclosed a bank draft in US dollars payable to Bank Account Name
"Geoinformatics International", A/C Number: 329-2-61421-5

By Bank Transfer with following details:

Name of A/C: "Geoinformatics International" **A/C Number:** 329-2-61421-5

Swift address: SICOTHBK **Branch:** Bangkok (Pathumthani) Branch

Address: The Siam Commercial Bank Public Company Limited,
161 Moo 5, Bangkok Munag, Pathumthani 12000, Thailand

(Please fax us the copy of bank advice after the bank transfer)

Please charge the above fee in US dollars to my: **American Express Card**

Card Number: _____ Expiry Date (Month/Year): _____

Card Code: _____ (please provide 4 digits code)

Cardholder's Name: _____

Cardholder's Signature: _____ Date: _____

Amount: _____

Accommodation:

I am also submitting the separate Accommodation Reservation Form

I will make my own accommodation arrangements

Mail Registration Form to:

Ms. Kanchana Nakhapakorn

P.O. Box 44, Klong Luang, Pathumthani 12120, THAILAND

Or Phone/Fax to: +66-2-963 9148

Or E-mail to: healthgis@j-geoinfo.net; healthgis@gmail.com