REGISTRATION FORM

PERSONAL INFORMATION

Prof. Dr. Mr. Ms.		Family Name		First Name	
Institution					
Mailing Address					
City		Zip Code		Country	
Fax		E-mail		Passport No.	

REGISTRATION

Category	**Prior to June 1, 2008**	**After June 1, 2008**
Delegate	☐ USD 400	☐ USD 450
Accompanying person	☐ USD 200	☐ USD 250
Student	☐ USD 200	
Total registration fees	USD	

HOTEL RESERVATION

Hotel Preference	**Check-in**	**Check-out**	**Subtotal**
1. All Flowers Village Hotel			USD60 x__nights x____rooms = ____USD
2. Guest House			USD30 x__nights x____rooms = ____USD
☐I do not need any hotel reservation	☐I will share a twin room with:		

TOURS RESERVATION

ID	**Description**	**Prices**	**Subtotal**
T-1	Sanxindui + Longqian Hill	☐free	free
T-2	Chongqing+Three-gorge Area	☐USD 900 X ____person(s)	USD
T-3	Xi'an +Beijing	☐USD 850 X ____person(s)	USD

PAYMENT OPTIONS

I wish to pay a total amount of _____USD by:

☐Bank Transfer

Account name: Institute of Mountain Hazards and Environment, Chinese Academy of Sciences and Ministry of Water Resources; **Bank name:** Bank of Communications, Chengdu Branch; **Swift Code:** COMMCNSHCDU; **Account number:** 511609017-01-0149008063. Please make sure to indicate the name of the Conference "13th ICSM" on the bank transfer, and send us a copy of the receipt of the bank transfer.

☐Credit Card Visa; ☐ MasterCard; ☐ American Express; ☐Credit card

№_____ Expiration date_____

Cardholder's Name _____ Cardholder's Signature_____

☐Bank Draft should be payable to "Institute of Mountain Hazards and Environment, Chinese Academy of Sciences and Ministry of Water Resources" and be sent to the following address:

Dr. Donghong Xiong

Institute of Mountain Hazards and Environment, C A S, P. O. Box 417, Chengdu, Sichuan 610041, China.

Date _____ **Signature**_____