LTD-17 RECEPTION SHEET

Please fill out the form below and hand it to our staff at the reception counter.

Title	□Mr. □Ms. □	Dr.	\square Prof.	□Sir
	Last Name		First Name	
Name				
Affiliation (Company/University/ Institute name)		1		
Registered As	□ Student			
	Please put a mark below regarding a student support application.			
	I applied for a student support.			
	☐ I did NOT apply for a student support.			
	□ Normal participant			
D	☐ Exhibitor / Donator			
Do you have any	☐ Yes			
accompanying person(s)?	Please write the name of the accompanying person below.			
person(s):	No No			
Accommodation	Hotel Name		Check-in Date	Number of night(s)
	☐ Kurume Station Hotel		July	
	☐ Washington Hotel Plaza Kuru	ume	July	
	☐ Hotel New plaza Kurume		July	
	☐ Highness Hotel Kurume		July	
	☐ Kurume Hotel Esprit		July	
	☐ Toyoko Inn Nishitetsu Kurume-eki Higashiguchi		July	
	☐ Kurume Terminal Hotel		July	
	☐ Select Inn Kurume		July	
	☐ Hotel Suikoen		July	
	☐ Ennan Hotel Kurume		July	
	☐ Other ()	July	