TO: ISQFD 2017 organizing committee

E-mail: isqfd2017@juse.or.jp

**REGISTRATION FORM**

The 23rd International Symposium on Quality Function Deployment,

September 7-8, 2017

|  |  |
| --- | --- |
| Name | Mr. / Ms. |
| Company |  |
| Job Title |  |
| Section |  |
| Main Product |  |
| Mailing AddressOfficeHome |  |
| Telephone |  | Fax |  |
| E-mail |  |
| Payment | Choose the method of payment and fill in the necessary information.Registration fees are requested to be paid in advance. |
| Participant　　　　　 JPY54,000- per personPresenter, Co-author JPY43,200- per personGraduate student, student JPY27,000- per person |
| Credit CardPlease provide your e-mail address. To which the link to the invoice will be sent by PayPal.E-mail address:　　　　　　　　　　　　　　　　　　　　 | Bank TransferPaymenthave remitted　　　　will remitto The Bank of Mitsubishi-Tokyo UFJ Ltd.Shinjuku-dori Branch in TokyoAccount name: Union of Japanese Scientists and Engineers Account no: 0084317SWIFT Code: BOTKJPJT\*Please note "ISQFD17" on your remittance form |
| please send receipt　　　　　　　 do not need receipt |
| Cancellation Policy：After **Aug 29 –** On or before **Sep 5** 17:00(JST): 20 % of the participation fee.On or before **Sep 6** 17:00(JST): 50% of the participation fee.On or after **Sep 6** 17:00(JST): 100% of the participation fee. |
| Flight Schedule | Arrival |  |
| Departure |  |
| Notes(Any special needs that you would like the secretariat to know? i.e. meal preference, **visa request\***) | **Meal preference**:  | Vegetarian / Non-Vegetarian |
| **Request for invitation letter**: | Yes / No |
| **Nationality**: |  |
| **Date of Birth**: |  |

\*If you need to apply for Japanese Visa, please indicate your date of birth in the space above. JUSE will issue invitation letter upon confirming remittance of the participation fee.