

REGISTRATION FORM

The 12th IARU Region 3 International Conference

Taipei, Taiwan – 16th to 20th February 2004

(Fill out one form per PERSON attending the conference as a delegate or a partner)

PLEASE PRINT WHEN FILLING OUT THIS FORM

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CONTACT INFORMATION:

| | | | | | |
|--|----------|------------------------|----------------------------|------------------------|--|
| Member IARU Society | | | | | |
| Participant: | Delegate | Partner | Callsign: (if Licensed) | | |
| Title: Mr. / Mrs. / Ms / Dr. / Other _____ | | | Surname | | |
| First Name(s) | | | Handle Name: | | |
| Street Address | | | | | |
| Suburb: | | City: | | | |
| State or Province | | Country: | | Post/ Zip Code: | |
| Telephone Contact Number: (Business Hours) | | Country Code: _____ | Area Code: _____ | Phone Number: _____ | |
| Telephone Contact Number: (After Hours - Home) | | Country Code: _____ | Area Code: _____ | Phone Number: _____ | |
| Internet E-Mail Contact: (If available) | | | | | |
| Position in your Society / Organization (If you are a delegate) | | | | | |

TRAVEL DETAILS:

| | | | | |
|--------------------------------------|--|---|------------------------------------|--|
| Expected Arrival Date in Taipei: | | _____ / _____ / 2004 (day / month / year) | Time of Arrival: (local Time) | |
| Airline: | | | Flight Number: | |
| Expected Departure Date from Taipei: | | _____ / _____ / 2004 (day / month / year) | Time of Departure: (local Time) | |
| Airline | | | Flight Number: | |

CLOSING DATE FOR REGISTRATIONS TO BE RECEIVED: January 16 2004

Chinese Taipei Amateur Radio League

(Attn: R3-Staff)

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