

# REGISTRATION FORM (revised)

## ISHS International Orchid Symposium

January 12-15, 2010

National Museum of Natural Science  
Taichung, Taiwan, R.O.C.

Early registration deadline  
is October 1, 2009

### A. Participant Information

Surname		First Name			
Title	<input type="checkbox"/> Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> _____	ISHS member: <input type="checkbox"/> Yes. <input type="checkbox"/> No.			
Institution					
Address			Postal Code		
Country		Fax		Phone	
Email					
I intend to present a paper: <input type="checkbox"/> Yes. <input type="checkbox"/> No.					
If yes, <input type="checkbox"/> Oral presentation or <input type="checkbox"/> Poster presentation.					
Title					
Author(s)					
Abstract is attached <input type="checkbox"/> / has been sent <input type="checkbox"/> / will be sent. <input type="checkbox"/>					

### B. Accompanying Person(s)

Surname		First Name	
Surname		First Name	

### C. Registration Fees (use to complete Section D)

Registration Categories	Payment received by October 1, 2009	Payment received after October 1, 2009
ISHS member	US\$400	US\$450
Non ISHS member	US\$450	US\$500
Student and Post-Doctoral	US\$200	US\$250
Accompanying person	US\$100	US\$150

For more information, visit <http://hrt.msu.edu/IOS>

**D. Check list of all fees**

Registration Fee			Total amount
ISHS member	US \$ _____	× ___ person(s)	= US \$ _____
Non ISHS member	US \$ _____	× ___ person(s)	= US \$ _____
Student and Post-Doctoral	US \$ _____	× ___ person(s)	= US \$ _____
Accompanying person	US \$ _____	× ___ person(s)	= US \$ _____

TOTAL PAYMENT	= US \$ _____
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**E. Payment – by direct transfer (return this form with a copy of remittance receipt)**

I have remitted the sum of US \$ \_\_\_\_\_ on \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yr)

through \_\_\_\_\_ (bank)

by direct transfer in US dollars to the following bank:

Name of Bank: HUA NAN COMMERCIAL BANK, LTD. TAI TA BRANCH NO.1 SEC.4 ROOSEVELT RD. TAIPEI, TAIWAN, R.O.C.
Account Name: Taiwan Society for Horticultural Science
Account NO: 154-10-000567-7
Swift Code: HNBKWTWP154

**F. Payment – by credit card (return this form with your signature)**

I will pay by credit. Please charge the total amount to the credit card below.

\*Note: no payment withdrawing by credit card.

<input type="checkbox"/> VISA <input type="checkbox"/> Master Card	
Name of holder (Print)	Expiry Date /
Card number	
Total amount	
Authorized Signature	Date

**G. Please complete this form and mail or fax to:**

<b>Dr. Yung-I Lee</b> <b>Botany Department, National Museum of Natural Science</b> <b>No.1, Kuan-Chien Rd., Taichung 404, Taiwan, R.O.C.</b> <b>Fax: +886-4-23285320</b>
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