**26th WCOI Japan Scientific Conference**

**1st Japan-India Collaboration**

**Delegate Registration Form**

**PERSONAL DETAILS**

TITLE：□　Dr. □　Mr. □　Ms.

FIRST NAME： LAST NAME：

ORGANIZATION：

POSITION：

**ADDRESS FOR CORRESPONDENCE**：

CITY：

PHOTO

3.5 x 2.5 cm

STATE：

ZIP/POSTCODE：

COUNTRY：

WORK PHONE：

MOBILE PHONE：

E-MAIL：

PHOTOGRAPH：(Please attach a JPG data )

**Payment Procedure:**

Please make a payment according to the instruction of the ***Paypal*** invoice sent form Kyoko Fujii ([fujiikyoko.dos@gmail.com](mailto:fujiikyoko.dos@gmail.com)), the secretariat of WCOI Japan Conference.

If you are paying for the first time with Paypal, you need to register for your account.

Available: VISA, Mastercard, JCB, American Express, and DISCOVER as credit cards.