## Payment form for Credit card

## The 12th International Symposium on Advanced Science and Technology in Experimental Mechanics (12th ISEM '17-Kanazawa) Kanazawa, Japan, November 1-4, 2017

Title: $\Box$ Prof. $\Box$ Dr. $\Box$ Mr. $\Box$ Ms.
First name (given): Last name (family):
Affiliation:
E-mail:
Registration number:
Credit card (VISA or MasterCard only)
Credit card type: Visa MasterCard
Charge to my card number:
with expiration date (Month/Year) ( / )
Total amount: ¥ <u>40,000-</u>
Name of cardholder (please type block letters)
Date: (Day/Month) / / 2017 Signature:

Note: The personal information on your credit card is strictly protected and is reliably canceled soon after its use.

Please complete this form and send it by <u>**Fax**</u> to Registration Office: Dr. Kenji NAKAI, Okayama University of Science, Okayama, Japan

## Fax No: +81 (86) 256-9615

If you have any inquiry, please send an e-mail to nakai@mech.ous.ac.jp