



QSMT SYMPOSIUM 2017 Inside Out/Outside In Clothing, Cloth and the Meeting of Cultures 8-13 January 2017 InterContinental Bangkok Bangkok, Thailand

## **CONFERENCE REGISTRATION FORM**

Please note: all fields marked with an asterisk (\*) are required.

| PARTICIPANT'S DETAILS  | S                       |                          |                     |   |  |
|--|-------------------------|--------------------------|---------------------|---|--|
| *Mr. Mrs. Ms. Dr. (pleas   | se circle one)          |                          |                     |   |  |
| Gender (for potential roommate information if relevant)  |                         |                          | □Male               | □Female   |  |
| *First Name  |                         |                          | *Family Na          | me  |  |
| Affiliation  |                         |                          | i                   |   |  |
| *Mailing Address   |                         |                          |                     |   |  |
|  |                         |                          |                     |   |  |
| Telephone  |                         | Fax                      |                     |   |  |
| Mobile   |                         | *E-mail                  |                     | Alternate email   |  |
| Dietary requirements   | ☐ Vegetarian ☐          | ☐ Vegan ☐ Halal          | ☐ Food Allerg       | ies (please specify)                                    |  |
|  | □ Other                 |                          |                     |   |  |
| ICOM membership  | □ Yes □ No              |                          |                     |   |  |
|  |                         |                          |                     |   |  |
| REGISTRATION FEES  |                         |                          |                     |   |  |
| ☐ Early Bird (received before 31 October 2016) - US\$ 450 (THB 14,850)   |                         |                          |                     |   |  |
| ☐ Regular (received 1 November - 20 December 2016) - US\$ 550 (THB 18,000)   |                         |                          |                     |   |  |
| ☐ Student Fee (received by 20 December 2016) - US\$ 395 (THB 13,000)*  |                         |                          |                     |   |  |
| *a copy of student I.D. must be submitted with registration  |                         |                          |                     |   |  |
| ☐ Advance Single-Day Registration (received by 20 December 2016) - US\$ 160 (THB 5,000) per day                    |                         |                          |                     |   |  |
| □ 9 Jan □ 10 Jan □ 11 Jan □ 12 Jan □ 13 Jan  |                         |                          |                     |   |  |
| Deadline for submission of registration form: 20 December 2016   |                         |                          |                     |   |  |
|  |                         |                          |                     |   |  |
| PAYMENT METHODS  |                         |                          |                     |   |  |
| Confirmation of registration will be issued by e-mail or fax within 7 working days upon receipt of full payment.   |                         |                          |                     |   |  |
| Late registrations are su  | bject to availability.  |                          |                     |   |  |
| Cancellations received   | by 30 November 201      | 6 will be refunded, le   | ess US\$ 45 admini  | stration fee.   |  |
| ☐ Credit Card I hereby authorize <b>Destination Services (Thailand) Co., Ltd.</b> to debit my credit card account. |                         |                          |                     |   |  |
| □ Visa □ Master Card □ American Express  |                         |                          | Issuing Bank        | Issuing Bank:   |  |
| Card Number:   |                         |                          | 3-digit (Visa,      | 3-digit (Visa, Master) / 4-digit (AMEX) CVV Number:     |  |
| Name on Card:  |                         |                          | Expiry Date         | Expiry Date:  |  |
| Amount: US\$   |                         |                          | Amount in w         | Amount in words: US Dollars                             |  |
| Cardholder's Signature:  |                         |                          |                     |   |  |
| ☐ Bank Transfer: Please  | add a bank processing   | g fee of US\$ 30, except | within Thailand.    |   |  |
| Beneficiary Name: QSM  | rsymposium              | Account Number: (        | 061-210862-6        | SWIFT Code: SICOTHBK                                    |  |
| Bank Information: Siam Commercial Bank PCL   |                         |                          |                     |   |  |
| Phra Barommaharajawa   | ng Branch, Nai Phra Ba  | arommaharajawang, N      | la Pralan Road, Phr | a Barommaharajawang, Phranakorn, Bangkok 10200, Thailan |  |
| *Please attach the trans   | sfer slip together with | the completed Regist     | ration Form.        |   |  |