



The Sixth International "Hiroshima" Symposium on the
Development and Application of Semiconductor Tracking Detectors
REGISTRATION FORM

*Note: registration for only the one-day Tracking Workshop ("Abe Fest")
requires a different registration form and payment.

To register for the Symposium, complete this form and fax it to 831-459-3422,
attention Jonathan Miller.

1 Personal Information:

| | |
|------------|----------------------|
| First Name | <input type="text"/> |
| Last Name | <input type="text"/> |
| Title | <input type="text"/> |
| Institute | <input type="text"/> |
| Address 1 | <input type="text"/> |
| Address 2 | <input type="text"/> |
| Address 3 | <input type="text"/> |
| Country | <input type="text"/> |
| Phone | <input type="text"/> |
| Fax | <input type="text"/> |
| Email | <input type="text"/> |

2 Scientific Interest / Activity:

3 Proposed Contribution, Title and Session:

4 Questions / Special Needs & Accommodations / Interests:

5 Registration Fees:

| | Full Fee | Spouse | Student Fee | Banquet |
|---------------------------------------|----------|--------|-------------|---------|
| Early Registration (ends June 11) | \$320 | \$70 | \$200 | \$80 |
| Late Registration (ends August 11) | \$400 | \$70 | \$300 | \$80 |
| # of attendees: | | | | |
| Total: | | | | |

6 Payment Options:

A. Credit Card (please fill in the information below and sign)

Credit Card Type:

Name on Card:

Card number:

Expiration Date:

Amount to be charged:

Signature:

B. Check (make check payable to "UC Regents-STD6", send to Robin Shaw, PBSci Div. Resources, 1156 High Street, UC Santa Cruz, CA, 95064)

Amount of check (US only):

7 Menu Selection for Banquet (select one):

Number of meals

Petit Filet Mignon and Chicken Strudel _____

Chicken Mediterranean and Rock Shrimp Crab Cakes _____

Special Meal (pls. specify needs: "vegetarian," etc.)

8 Interest in Spouses Program

yes no