

## MEMBERSHIP APPLICATION FORM

### Mathematical Science of Understanding and Predicting Regional Climate: A School and Workshop (28 Feb - 11 Mar 2011)

This form should be completed and returned to: **Institute for Mathematical Sciences, 3 Prince George's Park, Singapore 118402** or fax to: **(65) 6873 8292**

#### 1. PERSONAL PARTICULARS

Title and Full Name as in Passport/Identity Card ( <i>underline Surname/Family Name</i> ): Prof / Dr / Mr / Mrs / Ms**		Designation:	
Institution Name & Address:    Postal Address: ( <i>if different from above address</i> ):		Telephone Nos.:	
		(Office)	(Mobile)
		(Home)	(Pager)
		Fax No.:	
		E-mail Address:	
		Nationality:	
		Passport No.:	Date of Issue:
Date of Birth:	Sex*: <input type="checkbox"/> Male <input type="checkbox"/> Female	Place of Issue:	Date of Expiry:
Country of Birth:			

#### 2. ITINERARY AND ACCOMMODATION

Date of Arrival (confirmed/tentative**):	Date of Departure (confirmed / tentative**):	Lodging Arrangement*: <input type="checkbox"/> Yes <input type="checkbox"/> No	No. of accompanying family member(s):
If lodging arrangement is required please specify your preferences. ( <i>More information on lodging is available at <a href="http://www.ims.nus.edu.sg/vizinfo.htm">http://www.ims.nus.edu.sg/vizinfo.htm</a></i> ):			
<input type="checkbox"/> NUS Campus Lodging ( <i>limited availability</i> )		<input type="checkbox"/> Off Campus Club House / Inn / Hotel ( <i>indicate name below</i> )	
<input type="checkbox"/> Other Requests / Comments:		Room Type*: <input type="checkbox"/> Superior <input type="checkbox"/> Deluxe Occupancy*: <input type="checkbox"/> Single <input type="checkbox"/> Double Inclusive of breakfast*: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If your family member(s) is to accompany you, please provide the following for each family member.:			
Name		Relationship	City and Country of Birth
1.			
2.			
3.			
4.			

\*Please indicate  as appropriate

\*\* Please delete as appropriate

