



CONFERENCE REGISTRATION FORM

Asian Approximation and Wavelet Theory Conference (10 - 14 November 2003)

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 or email to: ims@nus.edu.sg, at least 1 month before the conference. Registration is free. If you are an IMS member or are applying for IMS membership, you do not need to complete this form.

Title and Full Name as in Passport/Identity Card (underline Sumame/Family Name): Prof / Dr / Mr / Mrs / Ms**			Designation:	
Institution Name:		Department:		
nstitution Address:		Postal Address:	(if different):	
E-mail Address:	Telephone Nos.:		Fax No	o.:
2. ACCOMMODATION (Applicable of	nly to overseas participa	ant requesting	accommodation ar	rangement)
Date of Arrival (confirmed / tentative**):		Date of Departure (confirmed / tentative**):		
Please specify your preferences.(More information on	accommodation is available at htt:	//www.ims.nus.edu.sg/	/vizinfo.htm)*:	B
□ NUS Campus Lodging (limited availability) □ Other Requests / Comments:	□ Off Campus Club House / In		Otel (indicate name below)	Room Type*: Superior Deluxe Occupancy*: Single Doubl Inclusive of breakfast*: Yes No
f your family member(s) is to accompany you, plea Name I. 2. 3.	ase provide the following for ea Relationship	ach family member:		

*Please indicate 🗵 as appropriate

^{**} Please delete as appropriate