



WORKSHOP REGISTRATION FORM

Workshop on Genomics

(14 - 17 Nov 2005)

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 2 weeks before the commencement of workshop.

1. PERSONAL PARTICULARS					
Title and Full Name as in Passport/Identity Card (underline Suma		Designation (please indicate PhD, Master or Undergrad if you are a student):			
Prof / Dr / Mr / Mrs / Ms**					
Institution Name:		Department:			
Institution Address:		Postal Address: (if different):			
E-mail Address:	Telephone Nos.:		Fax No.:		

2. ACCOMMODATION (Applicable only to overseas participant requesting accommodation arrangement)					
Date of Arrival (confirmed / tentative**):	Date of Departure (confirmed / tentative**):				
No. of Rooms:	No. of Adult:	No. of Child:			
Please indicate your preferred hotel*:					
Hotels with corporate rates	Near NUS campus				
Copthorne Orchid Singapore (<u>www.copthorneorchid.com.sg</u>) Pasir Panjang Inn					
Orchard Parade Hotel (<u>www.orchardparade.com.sg</u>)					
Orchard Hotel (<u>www.orchardhotel.com.sg</u>)					
Other hotel					
Special Instructions or Requests:					

Note: • Participants from certain countries may need to apply relevant visa prior to entry into Singapore. More information is available at <u>http://app.ica.gov.sg/travellers/entry/visa_requirements.asp</u>.

If you are requesting accommodation arrangement, the hotel may contact you for your credit card details to confirm / guarantee your reservation.

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