

Cluster2008 Visa Application Form

Cluster2008

Visa Support Office

c/o ICS Convention Design, Inc.

TEL: +81-3-3219-3600 FAX: +81-3-3292-1811

E-mail: cluster2008_visa@ics-inc.co.jp

Conference Information

1: Do you have an accompanying person? (Please write "Yes" or "No") _____

2: Registration Number _____

Personal Information

1: Full name (as it appears on your passport)

Title _____ Given _____ Middle _____ Family _____

2: Gender (please write "Yes") Male _____ Female _____

3: Date of Birth Month _____ Date _____ Year _____

4: Nationality _____

Office Information

1: Company / University / Institute Name

2: Department _____

3: Position at your office (e.g. Professor, Director, Leader, Officer, etc) _____

4: Mailing Address of Company / University / Institute (E-mail or "P. O. Box" is **UNACCEPTABLE.**)

Zip Code _____

5: Telephone Number (please write "Yes") Home _____ Office _____

Country Code _____ Area Code _____ Number _____

6: Fax Number (please write "Yes") Home _____ Office _____

Country Code _____ Area Code _____ Number _____

7: E-mail Address (the one you check most often)

Travel Information

(This visa is only for attending the conference. Staying in Japan for visiting friends or sightseeing for a long period is not accepted.)

[Arrival]

1: Arrival Date in Japan - Month _____ Date _____

2: Flight Number of Arrival in Japan _____

3: Departure Airport in Your Own Country _____

4: Arrival Airport in Japan _____

[Departure] 1: Departure Date from Japan - Month _____ Date _____

2: Flight Number of Departure from Japan _____

3: Departure Airport in Japan _____

4: Arrival Airport in Your Own Country _____

Cluster2008 Visa Application Form

Cluster2008

Visa Support Office

c/o ICS Convention Design, Inc.

TEL: +81-3-3219-3600

FAX: +81-3-3292-1811

E-mail: cluster2008_visa@ics-inc.co.jp

[Schedule]

You must fill out your schedule (Date / Activity / Hotel / Hotel Tel.) for each day.

(Including all other plans during your stay in Japan other than attending Cluster2008)

Date	Activity	Hotel	
September ____	_____	Hotel: ____	Hotel Tel.: ____
September ____	_____	Hotel: ____	Hotel Tel.: ____
September ____	_____	Hotel: ____	Hotel Tel.: ____
September ____	_____	Hotel: ____	Hotel Tel.: ____
September ____	_____	Hotel: ____	Hotel Tel.: ____
October ____	_____	Hotel: ____	Hotel Tel.: ____
October ____	_____	Hotel: ____	Hotel Tel.: ____
October ____	_____	Hotel: ____	Hotel Tel.: ____
October ____	_____	Hotel: ____	Hotel Tel.: ____
October ____	_____	Hotel: ____	Hotel Tel.: ____

Accompanying person

(This section is for accompanying person only)

1: Accompanying person's relationship to you ____ (e.g. Wife, husband, daughter, etc)

2: Full name (as it appears on his/her passport)

Given ____ Middle ____ Family ____

3: Gender (please write "Yes") Male ____ Female ____

4: Date of Birth Month ____ Date ____ Year ____

5: Nationality ____

6: Occupation ____

7: Company / University / Institute Name

If you have any questions about visas, please let us know.

Attn: This information will be used for only visa documents.