



**Registration Form**  
*The 23<sup>th</sup> TSRT Annual Conference*  
Eastern Grand Palace Hotel, Pattaya  
29 April - 1 May 2015

(Officer use only)

No.....  
...../...../.....  
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**1 Registration details (Please Print)**

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> .....	Name.....Surname.....
Institute	Department
Contact Address	
State/Province.....Postcode..... Telephone No.....	
Fax.....E-mail .....	

**2. Registration Fee including Gala dinner**

Foreign Participants    USD 150 (THB 4500)

**3. Payment options**

- Direct Transfer to TSRT Account  
**Siam Commercial Bank, Siriraj Branch**  
Account Name: "Thai Society of Radiological Technologist"  
Saving Account Number: 016-2-652808  
SWIFT CODE: SICOTHBK  
(Please scan payment slip and send it to E-mail: mtnpp@mahidol.ac.th)
- On Site Registration

**Payment Receipt Request  
(Please Print)**

Under participant's name    (Under company's name)

Name of Company:

Contact  
Address.....

State/Province.....Postcode.....  
Telephone No.....

Fax.....E-mail .....

**4. Dietary Request**

Halal    Vegetarian    Regular Foods