



Delegate Information

Name: Mr./Ms./Dr./Prof. _____

Institution: _____

Address: _____

City: _____ Postal Code: _____ Country: _____

Phone: _____ Fax: _____

E-mail: _____

Hotel Reservation:

Please tick in appropriate box and fill arrive/leave date on corresponding cells:

Hotel	Address	Room Type	Price(RMB*)	Registration
Hengshan Hotel ☆☆☆☆ (衡山宾馆)	534 Hengshan Road, Tel:+86-21-64377050	standard, with breakfast	600	<input type="checkbox"/>
Jiangong Jinjiang Hotel ☆☆☆ (建工锦江宾馆)	691 West Jianguo Road, Tel:+86-21-64155488	standard, with breakfast	380	<input type="checkbox"/>
Tianping Hotel ☆☆☆ (天平宾馆)	185 Tianping Road, Tel:+86-21-54514567	standard, with breakfast	400	<input type="checkbox"/>
Boxuelou Hotel ☆☆ (交大博学楼宾馆)	1859 Huashan Road, Tel:+86-21-62825500	standard, with breakfast	250	<input type="checkbox"/>

Hotel check-in date: _____ check-out date: _____ Total: _____ night(s)

Signature: _____ Date: _____

Room booking will be paid and guaranteed by:

Credit Card _____ No. _____ Expire Date _____

Holder's Name _____ Holder's Signature _____

Note:

- 1) The room won't be guaranteed if you register after November 10, 2006.
- 2) Room will only be held until 18:00 unless this reservation is guaranteed.
- 3) For guarantee booking: in case of any changes or cancellations, please contact us at least 24 hours before the day of arrival. Otherwise on room night & pick up fee will be charged without prior notice.