

3rd Annual Meeting of IGCP-582 and International Conference on Tropical Rivers

Registration Form

Please return this form by e-mail in the body of the message or as attachment to <rsinha@iitk.ac.in>, by fax to +81-29 861 3747, or by post (Rajiv Sinha, Department of Civil Engineering, IIT Kanpur, Kanpur 208016, INDIA) by **November 15, 2011 (firm)**

Surname _____ Name _____

Prefix (select one) Prof./Dr./Mr./Mrs./Miss Male [] Female []

Address _____

Tel: _____ Fax: _____

Email: _____

Presentation:

Preferred mode of presentation: Oral [] Poster [] Either []

Title of poster or oral presentation: _____

Please note that we will try to accommodate your preference as far as possible but may not be able to do so due to limited slots for oral presentations.

Abstract enclosed: Yes [] No []

Do you intend to submit a manuscript for inclusion in a special issue arising out of this conference?
Yes [] No []

Passport information for required for visa support letter:

Name on passport: _____

Date of Birth: _____

Passport Number: _____

Date and Country of Issue: _____

Date of Expiry: _____

(Provide passport information for spouse also, if participating)

- For participants wishing to share a room with twin beds with another conference participant, please name your roommate, if known [Name: _____], or are you willing to have your roommate assigned by the organizers? Yes [] No []
- Check-in date: January _____ Check-out date: January _____
- Special requests (dietary restrictions, wheelchair access, etc.): _____