ON SITE REGISTRATION FORM

Please provide information as you wish it to appear on your badge and in the list of participants.
One copy of this Registration Form should be completed for each active participant. Please complete using a typewriter or block letters. Do not forget to take a copy for your own records.

Title: [ ] Mr  [ ] Mrs  [ ] Ms
Family name
First name
Company/Organization
Department
Address
Postal code
City
Country
Phone (country-area-local)
Fax (country-area-local)
E-mail
Passport number or Korean resident number

Accompanying Person
Family name
First name

Registration Fees: (Tick category and fill in the ‘amount to be paid’).

<table>
<thead>
<tr>
<th></th>
<th>On site fee</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>IFLA member</td>
<td>525 Euro</td>
<td>601</td>
</tr>
<tr>
<td>Non-IFLA member</td>
<td>605 Euro</td>
<td>602</td>
</tr>
<tr>
<td>Student*</td>
<td>200 Euro</td>
<td>603</td>
</tr>
<tr>
<td>Accompanying person</td>
<td>300 Euro</td>
<td>660</td>
</tr>
</tbody>
</table>

* Participants applying for a student fee should provide a copy of their student card or an official letter from the head of their university or institution.

General Information
Is this your first World Library and Information Congress (IFLA)? [ ] Yes  350  [ ] No  351
Are you an IFLA member? [ ] Yes  351  [ ] No
If yes, what is your IFLA membership number? ____________________________

Social Programme
Opening Ceremony & Opening Exhibition  Sunday, 20 August 2006  included  670
Minister’s Gala Reception  Monday, 21 August 2006  included  671
Cultural Evening  Tuesday, 22 August 2006  included  672
Mayor’s Reception  Wednesday, 23 August 2006  included  673

Please note that we cannot guarantee the availability of Congress materials/ bag or the Library tours or sightseeing tours

PAYMENT INFORMATION REGISTRATION

Payment
Payment must be made in EURO. Please state your name and address clearly on cheques and money orders.
The total costs will be paid by:

Guaranteed credit card, following details are required:
Type of Card: [ ] AMEX  [ ] VISA  [ ] Mastercard  (no other credit card will be accepted)
Card Number: ____________________________________________
Expiration date: __/____/_____  Security code (last 3 digits on the back of the card) __________
Card holder’s name: _______________________________________
Signature: ________________________________________________