Ref. NO: 0312

Register Date: 05/05/2017, 08:29

Paid \$ 75 USD (2,500 Thai Baht)

Payment:

Yes

| Title : | Dr |
|---|--|
| First Name : Yoshihisa Family Name : Shirayama | |
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| Fax: | |
| Registration : | International Fellows |
| Participation : | As a presenter (Please complete all items required in this form) |
| Presentation: | Oral Presentation |
| Publish Status : | I am not willing to publish it in the conference publication. |
| Track for presentation: | Health promotion and Community health |
| For MPH Alumni: You are cordially to join the MPH Pre-conference and Home Coming Dinner on 24 May 2017: | Don't join |
| For all Participants: You are cordially invited to join the pre-conference: | Don't join |
| For all Participants: You are cordially invited to join the extra activities: | |

METHODS OF PAYMENT

Account Name: The 1st APACPH BANGKOK REGION CONFERENCE Branch: Tropical Medicine Hospital

Bank Address: Siam Commercial Bank Public Company Limited, Rajvithi Road, Rajthewee, Bangkok 10400, Thailand

Account No.: 254-217131-9 Swift Code: SICOTHBK

*Please send a copy of transfer slip together with registration form to: ketwaree.pun@mahidol.ac.th For Further Information: For English and Thai please contact: Phone (662) 354 8529 Fax: (662) 354 8227