**WORKSHOP ON RESEARCHING WOMEN AND SOCIETY 2017**

29 November 2017 (Wednesday)

INFORMM Auditorium, Universiti Sains Malaysia,

Penang, Malaysia

8.30 a.m. – 5 p.m.

**REGISTRATION FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | |
| Mr. | Mrs. | Ms. | Other:  (Please indicate the appropriate title) | | | |
| Full name: | | Nationality: | |
| Sex: Female ( ) Male ( ) | | | |
| Name of Institution/Organization/School: | | | |
| Address of Institution/Organization/School: | | | |
| Email Address: | Telephone No: | | Fax No: |
| **WORKSHOP FEES** | | | |
| Date of Registration: | | | |
| **Workshop Rate (Please tick √ the amount that you are paying)** | | | |
| |  |  |  |  | | --- | --- | --- | --- | | 1. Early bird Special Register BY 18th September 2017): | | USD 75 |  | | 1. Undergraduate Student: | | USD 50 |  | | 1. Registration after 18th September 2017 | | |  | | * Local Participants: | USD 80 |  | | * International Participants: | USD 100 |  | | | | |
| **Method of Payment**  Bank Draft/Money order Cash Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **Please mention payment reference: RWS 2017**  **Proof of Payment: Please scan the payment slip and attach it with the registration form.** | | | |
| **For the concurrent workshops, I would like to attend Workshop 1 / 2 / 3** (Please circle only one) | | | |

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| **ADDITIONAL INFORMATION** | |
| Special Dietary Requirements | Special Vegetarian Halal None  Food Allergies \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Other concerns/requests | No |

For more details, please refer to the website: **http://kanita.usm.my**

For inquiries, please contact us at:

**E-mail:** [**kanita@usm.my**](mailto:kanita@usm.my) **| Tel: (+604) 653 3445 | Fax: (+604) 656 6379**