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PAYMENT FORM - 6th TAHI IPv6 Interoperability Test Event

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Fax the information below to:  
TAHI Registration  
c/o Mika Torikiri, e-side, inc.  
Fax: 81-3-3585-8162

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Participant Name:

\_\_\_\_\_

Organization Name:

\_\_\_\_\_

Registration Number:

\_\_\_\_\_

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REGISTRATION FEE: 20,000 JPY (General) ; 5,000 JPY (Student)

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CREDIT CARD INFO

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Credit Card:     VISA             MasterCard             AMEX

Cardholder's Name:

\_\_\_\_\_

Card Number:

\_\_\_\_\_

Expiry Date:                      MM                      YY

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PLEASE DO NOT SEND CREDIT CARD INFORMATION BY E-MAIL.  
YOUR NDA MUST BE SUBMITTED TO COMPLETE REGISTRATION.

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