**The 11th International Conference** **on Environmental and Rural Development   
 in conjunction with**

**the 2nd International Sustainable Agricultural Intensification and Nutrition Conference**

**( 11th ICERD & 2nd SAIN Conference)**

**Royal University of Agriculture, Siem Reap Province, Cambodia**

**28th February - 01st March 2020**

**CONFERENCE PARTICIPATION FORM**

*Please fill-up this form and send to the 11th ICERD Organizing Committee through Conference secretariat at e-mail* [***11thicerd@gmail.com***](mailto:11thicerd@gmail.com) *by* ***15th January 2020.***

|  |  |
| --- | --- |
| **Personal and Contact Information** | |
| Title | Click here to enter text. |
| First name | Click here to enter text. |
| Middle name | Click here to enter text. |
| Family name | Click here to enter text. |
| Position | Click here to enter text. |
| Department/Unit | Click here to enter text. |
| School/Group | Click here to enter text. |
| University/Institute/College | Click here to enter text. |
| Bureau/Organization | Click here to enter text. |
| Address | Click here to enter text. |
| Telephone/Mobile | Click here to enter text. |
| E-mail | Click here to enter text. |
| Nationality | Click here to enter text. |
| Passport no./ID no. | Click here to enter text. |
| Abstract no. | Click here to enter text. |
| Dietary requirements | Click here to enter text. |
| **Type of Registrant** | |
| 🞎 Professional 🞎 Student\* 🞎 Listener/Accompanying person  *\*Please enclose proof of status, i.e. copy of student ID, etc.* | |
| **Objective(s)** | |
| I 🞎 join the conference’s welcome dinner (28th February 2020, evening)  🞎 attend only the scientific program (29th February 2020)  🞎 make a presentation by oral or poster  🞎 submit full paper  🞎 join in the conference awarding ceremony and banquet (29th February 2020, evening)  🞎 join in the post-conference ***local*** excursion (01st March 2020) – Need to pay for USD 37 additional for Angkor Wat Entrance Fee  🞎 join in the post-conference excursion (02nd – 03rd March 2019) – Fee will be determine with minimum 10 participants  🞎 Others (please specify) ……………………………………………………………………………………………. | |
| **Title of oral and poster presentation** | |
| Abstract code | Click here to enter text. |
| Title of abstract | Click here to enter text. |
| Thematic area | Click here to enter text. |
| **Accompanying person during the excursion (If any)** | |
| Name | Click here to enter text. |
| Relationship | Click here to enter text. |
| **Accommodation (during the conference)** | |
| 🞎 ANGKOR HOTEL 🞎 ANGKOR PARADISE HOTEL (Conference Venue) 🞎 Other  Other, Please specify  Name of hotel: Click here to enter text.  Address: Click here to enter text.  Telephone: Click here to enter text. | |
| Check-in date and time | Click here to enter text. |
| Check-out date and time | Click here to enter text. |
| **Travel details (Siem Reap Airport)** | |
| Arrival date | Click here to enter text. |
| Arrival time | Click here to enter text. |
| Flight no. | Click here to enter text. |
| Departure date | Click here to enter text. |
| Departure time | Click here to enter text. |
| Flight no. | Click here to enter text. |
| Do you need airport pick up for arrival? | 🞎 Yes 🞎 No |
| Do you need airport pick up for departure? | 🞎 Yes 🞎 No |
| Other notification | Click here to enter text. |

…………………………..

Signature

Date (dd/mm/yy) …………………………………