**ESAFS 2019 Conference Registration Form** (items in red are required)

ESAFS 2019. Taipei, Taiwan. November 3-7, 2019  
This Registration Form is only for conference registration. After finish this form, please finish the payment of conference fee following the description of the web page below: [http://www.cssfs.org.tw/ESAFS2019/Registration.html](https://www.google.com/url?q=http://www.cssfs.org.tw/ESAFS2019/Registration.html&sa=D&ust=1559371057032000&usg=AFQjCNE24s3Jag6Kjn1VMS1Wp--kM7Sqfw)

One's registration and abstracts will be withdrawn if the payment is not completed by 5 Oct 2019.

Intended tour participants need to make the tour registration and another payment of tour fee as shown on: [http://www.cssfs.org.tw/ESAFS2019/Tour-regi.html](https://www.google.com/url?q=http://www.cssfs.org.tw/ESAFS2019/Tour-regi.html&sa=D&ust=1559371057033000&usg=AFQjCNGL4r_vGdLB_o1B1fm1jBd-1z6dzA)

The personal information will not be used other than on academic purposes. If modifying of submitted information is needed, please contact conference secretariat: [esafs2019@g4e.npust.edu.tw](mailto:esafs2019@g4e.npust.edu.tw)

First/given & middle name: (e.g. Aebico Dufy; Aebico D.; A. Dufy)

Last/family name (All letters in capital): (All Capital; e.g. GAHEJIKO)

Chinese name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender:

Position and/or title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (e.g. Prof. / Research Fellow / Dr. / PhD student / MS student ......)

Department and institute/organization:

Address:

City: Zip code:

Country: TEL: (include international code)

E-mail address: FAX:

Diet restriction: None/ Vegetable ONLY/ Fish with vegetable ONLY

Approval for receiving ESAFS-related information in the future: Agree / Not agree

(If you do not agree, your personal information will be deleted after the ESAFS 2019.)

Participating categories: Regular participant/ International student/ Local participant/ Local student/ Committee member/ Sponsor/ Moderator/ (Co-) Organizer

Abstract submission:

|  |  |  |
| --- | --- | --- |
|  | Abstract Number  (ABS###) | Role  (Presenting, Corresponding, and/or Co- Author) |
| 1st |  |  |
| 2nd |  |  |
| 3rd |  |  |
| 4th |  |  |
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Remarks:

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