

To: **Prof. Akira Kobayashi**, Chairman of Organizing Committee
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REGISTRATION FORM

The 32nd IAPS Meeting 2025

**The 18th International Workshop on Plasma Application
& Hybrid Functionally Materials**

March 28—March 31, 2025

Patong, Phuket Thailand



Name: _____
First name (Middle name) Family name

Job Title: Prof. Dr. Mr. Ms. (Student: UG, MC, DC, Supervisor's name: _____)

Institution: _____

Mailing Address: _____

Zip code: _____

Country: _____

Telephone: _____

Fax: _____

Email: _____

Area of Interest: _____

- ☐ I will participate in the **IAPS Meeting 2025**.
Accompanying persons YES ☐ NO ☐
- ☐ I will reserve the room of the Conference Hotel from _____ to _____
for _____ nights by myself.
- ☐ I intend to present a paper. (oral, poster): Students should present in poster session.
- ☐ I plan to submit a paper to the special issue of the journal **Frontier, Vol.18**.

Note: Early-Registration is up to January 31, 2025

Presentation Title: _____

Author(s): _____

Signature: _____ **Date:** _____