

The 2nd Meeting of the Asian Leksell Gammma Knife Society Nagoya, Japan The 14th Japanese Leksell Gammma Knife Society Meeting

NAGOYA CONGRESS CENTER, Nagoya, Japan
November 11- 13, 2010

We, NISSIN TRAVEL SERVICE appointed as the official travel agent for the meeting will handle your hotel accommodation. We have blocked your rooms at following hotels that are convenient for your stay. As the reservations will be made in order of receipt of the application form, we recommend your early booking to avoid missing your first choice. If the hotel of your first choice is fully booked, we will reserve your 2nd or 3rd choice hotel instead.

HOTEL ACCOMMODATION LIST

| Name of Hotel | Type of room | Room Rates | Access |
|---|------------------|------------|--|
| Hotel Grand Court Nagoya | Single | ¥17,000 | 1 min. walk from JR Kanayama Sta. |
| | Deluxe Single | ¥21,000 | |
| Cypress Garden Hotel | Single | ¥11,000 | 1 min. walk from JR Kanayama Sta. |
| | Twin(Single use) | ¥14,500 | |
| Nagoya Kanayama Washington Hotel Plaza | Single | ¥8,400 | 3 min. walk from JR Kanayama Sta. |
| Meitetsu Inn Nagoya Kanayama | Single | ¥7,800 | 4 min. walk from JR Kanayama Sta. |
| Hotel Route-Inn Nagoya Higashi Betsuin | Single | ¥6,700 | 4 min. walk from Kamimaetsu Sta. of subway MEIJO line |

- The above room rates include service charge and 5% tax.
- The above room rates are applicable to one person and one night.
- Breakfast is included.

APPLICATION

- ☐ Application Form (EXCEL) [download](#)

Fill in the application form and fax to Nissin Travel Service. (+81-3-5210-5756)
Upon receipt of your application form, the confirmation sheet will be sent by FAX.

- ☐ Online booking [click here](#)

Automatic message will be sent to you by e-mail first, then the confirmation sheet will be sent to your e-mail address later.

DEADLINE

- ☒ **Oct. 11 (Mon), 2010**

PAYMENT

- ☐ Amount of total payment shown in the confirmation sheet will be charged on your credit card promptly.
The following credit cards are acceptable.
VISA, MasterCard, AMEX, JCB
- ☐ Please note that a handling fee of ¥1,050 will be applied to all applications.

CANCELLATION

We shall accept the cancellation requests with a written notification which should be sent by e-mail or fax within our office hours in Japan local time.
Regarding a cancellation for personal reasons, the following cancellation charge will be applied and deducted from your refund.

| Time of Cancellation | Cancellation Charge |
|--|-------------------------|
| 8 to 14 day prior to the check-in date | 10% of daily room rate |
| 7 to 2 day prior to the check-in date | 20% of daily room rate |
| 1 day prior to the check-in date | 50% of daily room rate |
| On the date of arrival or No-Show | 100% of daily room rate |

Arrangements

Please feel free to contact us by e-mail for your international air ticket, train tickets and other travel needs you wish in Japan.

CONTACT

NISSIN TRAVEL SERVICE CO. LTD.,
Retail sales Dept. I
1-5-5 Kudan-minami, Chiyoda-ku, Tokyo, Japan
TEL: 03-5210-5751 FAX: 03-5210-5756
Office hours : 09:30~18:30 (Mon-Fri except national holiday)
E-mail: congress@nissin-trvl.co.jp



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APPLICATION FORM FOR HOTEL ACCOMMODATION

Please complete this form and fax to NISSIN TRVEL SERVICE.

Fax No. +81-3-5210-5756

DEADLINE October 11, 2010

Please type or print in block letters and check appropriate boxes.

* DATE : ____ / ____ / 2010

* indicates required field

NAME * ☐ Dr. ☐ Prof. ☐ Mr. ☐ Ms.

Family* _____ Middle _____ First *

ORGANIZATION

*

ADDRESS * ☐ Office ☐ Home

Postal code

County

CONTACT

Phone*

Fax*

e-mail

Accompanying person, if any

☐ Dr. ☐ Prof. ☐ Mr. ☐ Ms.

Family _____ Middle _____ First _____

HOTEL ACCOMMODATION *

Your Choice of Hotel *

Room Type *

Date of Stay *

1st. *

☐ SGL ☐ Nov.10 ☐ Nov.11 ☐ Nov.12 ☐ Nov.13
☐ DLX SGL/TWN(SGL USE)

2nd.

☐ SGL ☐ Nov.10 ☐ Nov.11 ☐ Nov.12 ☐ Nov.13
☐ DLX SGL/TWN(SGL USE)

3rd.

☐ SGL ☐ Nov.10 ☐ Nov.11 ☐ Nov.12 ☐ Nov.13
☐ DLX SGL/TWN(SGL USE)

OTHER REQUESTS/ARRANGEMENTS

MORE INFORMATION

Flight No. _____ M _____ D from _____
Flight No. _____ M _____ D to _____

Arrival time to hotel ____ : ____

CREDIT CARD *

☐ VISA ☐ MASTER ☐ AMEX ☐ JCB

Card number *

Security Cord (AMEX)

Name of card holder *

as it appears on the card

Expiration date* ____ / ____

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Privacy Policy

1. We will prepare a personal information protection management system that conforms to the JISQ15001 standard, and all our directors and employees will strictly observe it.
2. We will collect, use, provide, and handle personal information in accordance with the above management system.
3. We will legally and fairly collect such information within the range necessary to our business for use and provision within the aimed scope.
4. We will observe laws and ordinances on protection of personal information, guidelines, social norms, and public order and morals.
5. We will create a system that provides appropriate and timely responses to complaints or questions regarding the use of personal information.
6. We will take organizationally and technologically reasonable measures to prevent and correct loss, destruction, falsification, leakage, and other risks of all the personal information handled in our company, as well as illegal access to it.
7. We will constantly improve the personal information protection management system through regular auditing and checking.