COLLECTING AND SAFEGUARDING THE ORAL TRADITIONS:
AN INTERNATIONAL CONFERENCE

Organized as a Satellite Meeting of the General Conference of the International Federation of
Library Associations and Institutions (IFLA)
Local Organizer: Mahasarakham University

August 16-19, 1999
Khon Kaen, Thailand

Please return this form to: Prof. Dr. Chaveelak Boonyakanchana /
Or Dr. Surithong Srisa-ard
Before June 1, 1999
Academic Resource Center
Mahasarakham University
Maha Sarakham 44000 Thailand
E-Mail: Chaveelak@msu.ac.th/surithong.s@msu.ac.th
Fax: 66-43 721769 Tel : 66-43-723-523-4

1. Registration:
Please complete using a typewriter or block letters and return it to the above address
by June 1, 1999
Title ( ) Prof. ( ) Dr. ( ) Mr. ( ) Ms.
Family name: ………………………………………………………………………..
First name: ………………………………………………………………………..
Company/Institution: ………………………………………………………………..
Job Title / Position: ………………………………………………………………..
Mailing Address: …………………………………………………………………
City/Postal code: …………………………………………………………………..
Country: …………………………………………………………………………
E-mail address: …………………………………………………………………
Telephone: (Country-area-local): ………………………………………………
Fax (Country-area-local): …………………………………………………………..

Accompanying Person(s):
Family name, First name: …………………………………………………………
Family name, First name: …………………………………………………………
Family name, First name: …………………………………………………………

2. Registration Fees: (Check category and fill in the amount to be paid)

<table>
<thead>
<tr>
<th>Categories</th>
<th>US$</th>
<th>No. of persons</th>
<th>US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>( ) Participant, payment before June 1, 1999</td>
<td>220</td>
<td></td>
<td></td>
</tr>
<tr>
<td>( ) Participant, payment after June 1, 1999</td>
<td>270</td>
<td></td>
<td></td>
</tr>
<tr>
<td>( ) Accompanying Person(s), payment before June 1, 1999</td>
<td>120</td>
<td></td>
<td></td>
</tr>
<tr>
<td>( ) Accompanying Person(s), payment after June 1, 1999</td>
<td>150</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3. Hotel Reservation:

<table>
<thead>
<tr>
<th>Room Type</th>
<th>Single occupancy</th>
<th>Double occupancy</th>
<th>No. of days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superior</td>
<td>US$ 45</td>
<td>US$ 60</td>
<td></td>
</tr>
<tr>
<td>Deluxe</td>
<td>US$ 60</td>
<td>US$ 70</td>
<td></td>
</tr>
<tr>
<td>Junior suite</td>
<td>US$ 75</td>
<td>US$ 85</td>
<td></td>
</tr>
</tbody>
</table>

Arrival & Departure Details: Arrival date:……….. Flight No /Time:………………
Departure date:…………………. Flight No /Time:…………………. 

4. The total amount to be paid = US$………… (registration fee and one night of hotel deposit)

5. Payment: Payment must be made in US Dollars. Please state your name and address clearly on cheques. The total amount of registration fee and one night of hotel deposit will be paid by:

   ( ) Bank Transfer, made to:
   Account name: Dr. Chaveelak Boonyakanchana
   Account no: 608-2 30433-7
   Bank Address: Siam Comercial Bank Public Company Limited Mahasarakham Branch
   Maha Sarakham 44000, Thailand

   ( ) Bank Crossed Cheque or Draft payable to … Dr. Chaveelak Boonyakanchana

   ( ) Credit Cards Type of Card accepted: ( ) AmEX ( ) Master Card. ( ) VISA
   Card Number…………………………… Expiration date…………
   Card holders’ name………………………Signature card holder……………………

*Please send copy of cheque or draft by fax prior to mailing for easy reference, preparation of official receipt and accounting before the deadline stipulated above.

**Please note that all transfer expenses must be paid by sender

6. Type of Meals: ( ) General ( ) Islamic ( ) Vegetarian ( ) Other …………………

6. Flight Schedule to and from Khon Kaen by Thai Airways

<table>
<thead>
<tr>
<th>Flight No.</th>
<th>From Bangkok</th>
<th>To Khon Kaen</th>
<th>Flight No.</th>
<th>From Khon Kaen</th>
<th>To Bangkok</th>
<th>Schedule</th>
<th>Price (Round trip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>040</td>
<td>6:55</td>
<td>7:50</td>
<td>041</td>
<td>8:30</td>
<td>9:25</td>
<td>Everyday</td>
<td>2120 Baht</td>
</tr>
<tr>
<td>042</td>
<td>11:30</td>
<td>12:35</td>
<td>043</td>
<td>13:05</td>
<td>14:00</td>
<td>Everyday</td>
<td>2120 Baht</td>
</tr>
<tr>
<td>050</td>
<td>15:20</td>
<td>16:15</td>
<td>051</td>
<td>16:55</td>
<td>17:50</td>
<td>Everyday</td>
<td>2120 Baht</td>
</tr>
<tr>
<td>052</td>
<td>18:15</td>
<td>19:10</td>
<td>053</td>
<td>19:50</td>
<td>20:45</td>
<td>Everyday</td>
<td>2120 Baht</td>
</tr>
<tr>
<td>054</td>
<td>19:50</td>
<td>20:45</td>
<td>055</td>
<td>21:25</td>
<td>22:20</td>
<td>Fri, Sat, Sun only</td>
<td>2120 Baht</td>
</tr>
</tbody>
</table>

Airport fee = 60 baht
Thai Airways Office Phone Number: (043) 236523, 238835, 334112-3
Khon Kaen Airport: (043) 246305, 246345, 245001

7. Cancellations:
Cancellations are accepted only by written notice. For cancellations after June 1, 1999 no refunds will be given. For cancellation received before June 1, 1999, 50% will be refunded after the meeting.