

Application Form for SPring-8 Facilities

Proposal Info.	Proposal No.	<input type="text"/>	Project Leader	<input type="text"/>
	Experiment Title	<input type="text"/>	Affiliation	<input type="text"/>
	Beamline No.	<input type="text"/>	Telephone	<input type="text"/>
			e-mail	<input type="text"/>

(Note: The team members who will not stay in the Guest House should check off the box , and complete the blanks for "User name", "Affiliation", "User card no." and "Expected arrival / departure time in SPring-8")

Applicant List for the SPring-8 Facilities	User #1	User name / User card no.: _____ Last Name First Name Mid. Initial User Card Number Affiliation: _____ Affiliation <input type="checkbox"/> Check here if no reservation needed for the Guest House. Expected arrival / departure time at SPring-8: Between _____ and _____ Month / Day / Year - Hour Month / Day / Year - Hour Expected period of stay in the Guest House: Between _____ and _____ Month / Day / Year Month / Day / Year
	User #2	User name / User card no.: _____ Last Name First Name Mid. Initial User Card Number Affiliation: _____ Affiliation <input type="checkbox"/> Check here if no reservation needed for the Guest House. Expected arrival / departure time at SPring-8: Between _____ and _____ Month / Day / Year - Hour Month / Day / Year - Hour Expected period of stay in the Guest House: Between _____ and _____ Month / Day / Year Month / Day / Year
	User #3	User name / User card no.: _____ Last Name First Name Mid. Initial User Card Number Affiliation: _____ Affiliation <input type="checkbox"/> Check here if no reservation needed for the Guest House. Expected arrival / departure time at SPring-8: Between _____ and _____ Month / Day / Year - Hour Month / Day / Year - Hour Expected period of stay in the Guest House: Between _____ and _____ Month / Day / Year Month / Day / Year
	User #4	User name / User card no.: _____ Last Name First Name Mid. Initial User Card Number Affiliation: _____ Affiliation <input type="checkbox"/> Check here if no reservation needed for the Guest House. Expected arrival / departure time at SPring-8: Between _____ and _____ Month / Day / Year - Hour Month / Day / Year - Hour Expected period of stay in the Guest House: Between _____ and _____ Month / Day / Year Month / Day / Year
	User #5	User name / User card no.: _____ Last Name First Name Mid. Initial User Card Number Affiliation: _____ Affiliation <input type="checkbox"/> Check here if no reservation needed for the Guest House. Expected arrival / departure time at SPring-8: Between _____ and _____ Month / Day / Year - Hour Month / Day / Year - Hour Expected period of stay in the Guest House: Between _____ and _____ Month / Day / Year Month / Day / Year

If necessary, attach an additional list.