**Registration Cancellation Form (등록환불 신청서)**

\*Please fill out the below form and send it to the Secretariat ([secretariat@bns-symposium.com](mailto:secretariat@bns-symposium.com))

1. **Personal Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name (성명) |  | | 의사면허번호 | |  |
| Affiliation (소속) |  | | Phone No. (연락처) | |  |
| Email (ID) |  | | | | |
| Payment Details  (결제방법) | Account Transfer  (계좌이체) | The Remittance (송금자명) |  | | |
| Remittance Date (송금일) |  | | |
| Account Number (계좌번호) |  | | |
| Bank Name (은행명) |  | | |
| Credit Card  카드결제 | Card no. (카드번호) | |  | |
| Card Vendor (카드사) | |  | |
| Payment date & time (결제일시) | |  | |

1. **Notice**

* Request for registration cancellation is only acceptable before August 31(Thu), 2023 in KST.

등록 취소는 2023년 8월 31일(목)까지 가능합니다.

* It is required to send this form to the secretariat by email ([secretariat@bns-symposium.com](mailto:secretariat@bns-symposium.com) ).

등록 취소를 원할 시 해당 폼을 작성하여 사무국으로 메일 바랍니다.

2023. (M). (D). Name: (Signature)