

**2024 APAC 22 Cancellation of Registration**

* Your request must include the following details:

|  |  |
| --- | --- |
| Registration ID:  \* Please fill up the registration ID which you can check it at My Page after completing a registration. | |
| First Name  (Middle Name) |  |
| Last Name |  |
| Affiliation |  |
| Payment Method  (Please check the payment method.) | □ Credit Card □ Bank Transfer |

* Please include the receipt when submitting Cancellation of Registration.
* If you paid your registration fee by bank transfer, please fill up the following details to send your refund to your bank account.

|  |  |
| --- | --- |
| **E-mail** |  |
| **Account Holder** |  |
| **Address of Account Holder** |  |
| **Account Number** |  |
| **Bank** |  |
| **Swift Code** |  |
| **IBAN** |  |
| **Address of Bank** |  |
| **Reference ID** |  |
| **Refund** |  |