JRC2016 Registration Form (Overseas participant)

Name	
Organization	
Country	
Questionnaire (To complete your registration, we would be grateful for your cooperation to answer the following questions.)	
1. Please check	the conference you plan to mainly attend (Please select 1)
 ☐ JRS (The 75th Annual Meeting of the Japan Radiological Society) ☐ JSRT (The 72nd Annual Scientific Congress of the Japanese Society of Radiological Technology) ☐ JSMP (The 111th Scientifi-c Meeting of the Japan Society of Medical Physics) 	
2. How did you learn about this meeting?	
☐ The Society's website ☐ Friend who is a Society member ☐ My society ☐ Publicity I saw at another meeting: ☐RSNA ☐ECR ☐AOCR ☐Other ☐ Affiliated corporation informed me ☐ Other	
3. What are your objectives for attending the meeting? (Please select as many answers as apply.)	
 □ To acquire credit toward CME or a qualification □ To present a paper □ To listen to presentations □ To attend both the meeting and exhibition □ Other (
4. What is your p	profession? (Please select 1)
□ Radiologist □ M.D., other than Radiology □ Radiological Technologist □ Radiographer □ Biomedical equipment technician □ Physical Therapist □ Medical Physicist □ Occupational Therapist □ Nurse □ Affiliated with a Hospital □ Affiliated with an Organization/Association □ Educational institution □ Public sector □ Research institution □ Corporate member of Japan Medical Imaging & Radiological Systems Industries Association □ Sponsor □ Other corporation □ Other (