## Spatial Organization of Biological Functions October 20-25, 2025 Bangalore, India

## **Speaker/Attendee Housing Form**

Each speaker/attendee must register and complete a housing form. Registration is not complete until a housing form is received.

First/Given Name			Last/Family Name			
Institution			Department			
Street Addres	SS					
City Sta			te/Province		Zip/Postal Code	Country
Phone	Ext.		Fax		Email address	
<ul> <li>ACC</li> <li>On the</li> <li>All sleet</li> <li>Addit</li> </ul>	eeping rooms are	October 20) you e in the ICTS Gu guest fees will be 20 per night	cannot check in est House or the e your responsib <i>Gue</i> s	e National Cente bility. They must sts: \$10 per nig	or to 12:00 noon. r for Biological Sciences (I be paid in advance throug <b>ht, with food charges ad</b> ccept CASH.	h the Society.
☐ Male	☐ Fe	male (Requ	uired for housing	assignment)		
Name of ano	ther person atter	ding with whom	I can share			
unless other	wise noted belo	ow.		•	per 20, and departure Sa	-
Date of Arriva	al:		Date of I	Departure:		
ATTENDEE	DIETARY REST	RICTIONS: (ple	ase check all th	nat apply)		
No specific n	eeds □					
No fish □	No pork □	No meat □	No dairy □	No eggs □	No gluten □	
Comments: _						
Will you be b	ringing a guest?	Guests/spouses	accommodated	l on a space ava	ilable basis.	
No Yes			Guest Full Name:			
If bringing a	guest, GUEST I	DIETARY REST	RICTIONS: (ple	ase check all th	nat apply)	
No specific n	eeds 🗖					
No fish ☐ Comments: _	No pork □	No meat □	No dairy <b>□</b>	No eggs □	No gluten □	
Credit Card Number					CVC Code	
Expiration Date			Name on Card			

Please email this form upon completion of registration to: <a href="mailto:meetings@biophysics.org">meetings@biophysics.org</a>