*** Please send the form to the Operation Center Subaru Telescope**
Fax No. 1-808-934-5099.

Received No.:

Subaru Telescope Visitor Form (□ New □ Revised)

Date:

To: Director of Subaru Telescope

□	**Purpose**	□ **General** Acceptance Staff of Subaru Telescope: Purpose :		
		□ **Open Use(SUBARU)** □ **Open Use(UH88)** □ **Open Use(UKIRT)**	Proposal ID:	PI's Name:
□	**Visitor's Information**	Male / Female Name:	Affiliation:	Title:
		TEL: FAX:	email:	
□	**Hotel Reservation**	* Please choose one hotel from below. (□ Non-Smoking □ Smoking) □ Hilo Hawaiian □ Hilo Seaside □ Naniloa □ Uncle Billy's Hilo Bay Check-in Date: Check-out Date: **Conf No.:** Check-in Date: Check-out Date: **Conf No.:**		
□	**Hale Pohaku Reservation**	(□Non-Smoking □Smoking) *Special Request: Vegetarian Meal, Others(Check-in Date: Check-out Date: Check-in Date: Check-out Date:		
□	**Shuttle Reservation (Check one)**	※ **Hilo Base 13:30→Hale Pohaku 14:30、Hale Pohaku 15:00→Hilo Base 16:00** □ Need the Shuttle □ No Need (Arrange the transportation by myself) □ No Need (Arrive in Kona) □ No Need (Remote Observation)		
□	**Safety**	Do you plan to use machine tools, power hand tools, laser or hazardous chemicals? Yes / No If yes, describe what you will use. ( )		
□	**Rental Car (Hilo Only)**	Alamo/Hilo Airport 808-961-3343 Pick up Date & Time: Return Date & Time: □Economy □Compact □Mid-Size □Others: **Conf No.:**		
□	**Visiting Period**	Date of Arrival in Hilo: Date of Departure from Hilo:		
□	**Emergency Contact**	Name: Telephone:		
□	**Travel Insurance**	No / Yes (Company Name:)		

* The Above schedule has been approved.

Subaru Telescope Approval Signature :

Operation Center Use Only

Subaru Project (Mitaka)	Accounting	Operation Center		Approval
HP Accommodation Fee □ Subaru Telescope □ Individual Payment	□Copy	□HP Reservation □Car Reservation □Sent to Mitaka	□Copy to Hilo □Hotel Reservation	

* Visitors residing outside Japan need to submit this form to the Operation Center Subaru Telescope by fax (1-808-934-5099) and visitors residing in Japan need to submit this form to the Mitaka Office (81-422-34-3527).
* If a change to a previously submitted form is necessary, please submit a new form and be sure to check "Revised".