PAVI09: REGISTRATION FORM

PERSONAL DATA:

Title: __________
Surname: ___________________  First Name: ___________________
Institute: ___________________________
Mail Address: _______________________
City:________________  State: _____  Postal Code: ____________
Country: ________________
E-mail: _________________
Telephone: ______________

CONFERENCE FEES:

1. On-Site Fees:
   a. On-Site Registration: 850$
   b. Accompanying Person: 275$

2. Off-Site Fees:
   a. Off-Site Registration: 495$
   b. Accompanying Person/Meals-Boat-Dinner 275$
   c. Accompanying Person/Boat-Dinner 75$

3. Graduate Student Registration: -50$

4. Early Registration (Before May-15): -50$

See page below
For security reasons, we recommend you fill in the following form and send it via FAX, together with a photocopy of the credit card to MIT-Bates, fax number: 1-617-253-9599. If you have any questions please e-mail rsmick@mit.edu or call 1-617-253-9285.

TOTAL CONFERENCE FEES

From: _______________________________

To:  MIT-Bates

4’th Parity Violation 2009 (PAVI09) International Workshop
Bar Harbor, ME     June 22-26, 2009

LETTER OF AUTHORIZATION
For CREDIT CARD PAYMENT

I, _____________________________ hereby authorize MIT-Bates to charge the following credit card:

VISA: □    MASTERCARD: □    DISCOVER: □

AMERICAN EXPRESS   □

Credit Card Holder: __________________________
Billing Address: _____________________________
City: _____________   Postal Code: _________   Country: _________

Credit Card Number: ________________________
Security Code:   _____________
Expiration Date: (mm/dd/yy): ______________

With the amount of: ______________$US  for my participation in the 4’th Parity Violation 2009 (PAVI09) International Workshop.

Please include a photocopy of both sides of your credit card.

Cardholder’s Signature: __________________________
Date: __________________________