

Registration form

AFIN 2010

July 18-25, 2010, Venice/Mestre, Italy

(One registration allows one participant to assist to all NetWare 2010 events)

Please fill in the form, sign it by hand, and send it via one of the following:

Fax: 1-302-397-2009

E-mail: manuela@vicov.com

Title (Student/Prof/Dr): _____	First Name: _____	Last Name: _____
Paper number (e.g., #10254) (for authors only: only one paper per form) _____		
Institution: _____		
Street Address: _____		
City: _____	State: _____	Zip: _____ Country: _____
Phone: _____	Fax: _____	Email: _____

A. Conference Registration Fees

The full registration fees include: access to all the conferences, the welcome cocktail, the coffee breaks, the gala dinner, the CD-proceedings for the conference where the paper is registered (including CSDL and IEEE Xplore Publication, and indexing), and the participation to all the scientific events under the NetWare 2010 umbrella.

	IEEE Member IARIA Fellows	Non-IEEE Member	
Academic Rate IEEE Membership #	565 €	615 €	_____ €
Industry rate IEEE Membership #.....	765 €	815 €	_____ €
Additional late fee * - after April 15 /2010, 100 € - after May 15/2010, 150 € * late payment acceptable for attendance only * authors must register before April 15			_____ €
Additional Proceedings: 100 €/CD			_____ €
Extra pages: 105 € / page (over 6 pages)			_____ €
Additional Gala Dinner: 95 €			_____ €

TOTAL A: _____ €

B. Tutorials

Note: see final program

Tutorials are free of charge for all the attendees

C. Hotel price (LIMITED TO THE FIRST 60 REGISTERED)

Arrival date _____ Arrival time _____
Departure date _____ Departure time _____
Number of nights: _____

Conference Hotel:

Novotel Mestre/Venezia Hotel (All taxes & services are included in the conference prices)

- Room for 1 person with 1 breakfast **115 € x ___ nights = _____**
- Room for 2 persons with 2 breakfasts **125 € x ___ nights = _____**

Number of persons per room (One/Two)
Number beds (One/Two):
Bed for baby (Yes/No): (___ years old)

Total C: _____ €

D. Social event [July 23, 2010]

(See Details in the Preliminary Program)

Visit of Venezia Islands (full day with lunch, 2 islands) **140 € x ___ person(s) = _____**

(Venezia San Marco Square, Doge's Palace, Rialto's bridge, Campanile di San Marco, Scala del Bovolo, Fenice Theater, Campo San Stefano)

If 'credit card': **TOTAL (A + C + D): _____ €**

If "wire transfer": **TOTAL (A + C + D + 40€): _____ €**

Payment of Fees (check one of the methods):

By Credit Card (preferred method) (____ Mastercard or ____ Visa)

Card number: _____

CVV: _____ (this is the 3 or 4 digit number on the back of the card)

Expiration date: _____

Holder's Name: _____ Holder's Signature: _____

Credit Card billing address:

Street address: _____

City: _____ State: _____

Zipcode/Postcode _____ Country: _____

By Wire Transfer (please add 40 € for processing the wire transfer)

Contact manuela@vicov.com for the wire transfer accounts information

Date and Author's Signature: _____

Important: Please note that NO refund on any service mentioned above will be issued after April 15th, 2010 as all the services are ordered and paid when the registration is received.

In case of an emergency that prevents the original presenter from attending, the registration may be transferred to another presenter.