





REGISTRATION FORM

Please print clearly in uppercase! All blanks must be filled out!

Name:										
Company/Affiliation:										
E-Mail Address:			Phone:							
Mailing Address:										
City:			Mailing S	tate/Provinc	:e:					
Country:			Mailing P	ostal Code:						
IEEE Member Numbe	er:									
Are you an author? Yes N		No	Are you	a Student?	Yes	s No	If so:	Graduate	Under	graduate
If you are an author,	list your 10 d	digit EDAS	paper num	nber(s):						
Items Purchased (Please Circle)	IMS Member		IEEE Member		Non-Member		IEEE Life Member / Student		Qty	Subtotal
Conference Registration	Thru Sep 4	After Sep 4	Thru Sep 4	After Sep 4	Thru Sep 4	After Sep 4	Thru Sep 4	After Sep 4		
	\$380	\$450	\$400	\$470	\$555	\$615	\$250	\$300		
Additional Paper for Publication	\$50									
Extra Items										
Additional Banquet Ticket	\$75									
Additional Monday Lunch Ticket	\$30									
Additional Tuesday Lunch Ticket	\$30									
									Total	
Credit Card Type: \	/ISA	MasterCa	rd Ar	merican Exp	ress	Bank Tra	ansfer			
Name on Credit Card	d:				_ Cre	dit Card Nu	mber:			
Expiration Date:		_	Signature	e:						