

REGISTRATION FORM
MicroTAS 2007 CONFERENCE
7 – 11 October 2007
Paris, FRANCE



Institution: Industry Academia Research/Lab Government

Region: Americas Europe/Africa Asia/Oceania

First/Given Name: _____ Last/Family Name: _____

Preferred First Name on Name Tag: _____ Degree: _____

Position: _____

Organization: _____

Department: _____ Division: _____

Street: _____

City: _____ Zip/Postal Code: _____

State: _____ Country: _____

Phone No.: _____ Fax No.: _____

Email: _____

Classification: Conference Presenter Participant Paper No. _____

Authorization for name and contact information to be provided to commercial supporters and conference attendees: Yes No

If you require special arrangements, please indicate your request below:

Dietary: _____ Physical: _____

How did you hear about the MicroTAS 2007 Conference?

Direct Mail Another Conference Word of Mouth Conference Website Other: _____

Conference Fee

	Early Bird On or Before 30 June 07	Advanced From 1 July 07 to 24 August 07	Standard From 25 August 07 to 24 September 07	On-site After 24 September 07	
<input type="checkbox"/> Participant	€590	€700	€800	€875	€ _____
<input type="checkbox"/> Student (with confirmation*)	€495	€495	€550	€550	€ _____

* Include Student Advisor's Name: _____

Daily Conference Fee

	Registration Rate per Day	Number of Days	Which Days?	
<input type="checkbox"/> Participant	€300	x _____	_____	€ _____
<input type="checkbox"/> Student (with confirmation*)	€180	x _____	_____	€ _____

* Include Student Advisor's Name: _____

Pre-registration will close on 24 September 2007. After 24 September 2007, all prospective attendees will register on-site at the on-site rate. Please bring this registration form with payment to on-site registration.

Registration payment, in Euros (€) only, is due within 10 days of receipt of your registration. Registration is not valid or complete until payment is received unless other arrangements are made. The registration fee includes program material, (1) Technical Digest and CD-ROM, exhibit hall access, welcome reception, lunches, refreshment/coffee breaks, and a 20% nonrefundable cancellation fee. A €50 fee will be charged for all substitutions. All requests for refunds must be received in writing no later than 24 September 2007. No refunds will be made after this date.

Conference Proceeding and CD-ROM, additional set (conference fee includes 1 set)

Cost per set: €125 No. of sets: _____ Total € _____

Conference Banquet (Ticket NOT included in the conference fee)

Cost per ticket: €75 (Includes Museum Admission) No. of tickets: _____ Total € _____

Name of Guest (if applicable) _____

Grand Total € _____

PAYMENT

Bankwire (bankwire transfer information will be sent via email to you upon receipt of this form)

Check/Money Order – Make checks payable to in Euros (€) Only: **MicroTAS 2007 Conference**

Credit Card Payment (circle one): VISA MasterCard American Express

Card No.: _____

Exp. Date (MM/YY): _____ Verification Code (a 3 digit number on the signature line of your card): _____

Name of cardholder: _____

Cardholder signature: _____

Billing Street Address: _____

City: _____

State: _____ Zip/Postal Code: _____

Country: _____

If you prefer to pay by check or money order, please complete and submit this form, with your check or money order payable to:

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USA

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