

Conference Registration

Intelec '05

September 18-22, 2005 in Berlin, Germany

Please complete and return this form to:

VDE-Conference Services, Stresemannallee 15, 60596 Frankfurt/Main / Germany

Fax: +49-(0)69 96 31 52 13 vde-conferences@vde.com

Mr Ms

Title:..... Name:..... First Name:.....

Member-No.: Society:.....

Invoicing Address

Company:..... Dept:.....

Street No.:.....

Country: ZIP Code:..... City:.....

Phone:..... Fax:.....

e-mail:.....

Accompanying Person (Name, First Name):.....**

Conference Fees (include 1 copy of proceedings/CD-ROM, coffee-breaks, receptions and conference dinner)

Presenting author <input type="checkbox"/>	Registration until		August 19,	Registration after		August 19,
			2005			2005
Member * (VDE, EUREL, IEEE)	<input type="checkbox"/>	610,-- EUR		<input type="checkbox"/>	710,-- EUR	
Non-member	<input type="checkbox"/>	810,-- EUR		<input type="checkbox"/>	910,-- EUR	
Student *	<input type="checkbox"/>	150,-- EUR		<input type="checkbox"/>	170,-- EUR	
Exhibition only pass	<input type="checkbox"/>	90,-- EUR		<input type="checkbox"/>	90,-- EUR	
Additional proceedings	<input type="checkbox"/>	75,-- EUR		<input type="checkbox"/>	75,-- EUR	
Accompanying person**	<input type="checkbox"/>	80,-- EUR		<input type="checkbox"/>	80,-- EUR	
		1st choice 2nd choice			1st choice 2nd choice	
Technical excursions (20,- EURO; limited to 50 participants per excursion; bookings on first come, first served basis)	GSN	<input type="checkbox"/>	<input type="checkbox"/>	IPH	<input type="checkbox"/>	<input type="checkbox"/>
Touristic excursions (Sanssouci : 35,- EURO ; Museum 23,50 EURO ; limited to 100 participants per excursion; bookings on first come, first served basis)	Sanssouci	<input type="checkbox"/>	<input type="checkbox"/>	Museum of Telecommunication	<input type="checkbox"/>	<input type="checkbox"/>

* Copy of membership/student certification required!

** Participation of conference dinner and receptions only.

Date: **Signature:**

Please supply full credit card information to avoid delay in registration!

Mastercard American Express VISA

Card No:

Security No: (last 3 digits on rear side of Credit Card/last 4 digits on AMEX cards)

Expiration Date: ___ / ___

Holder's Name:

Date:..... Holders Signature: