

Conference Registration
FUSION 2008 – June 30 – July 03, 2008
Cologne, 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:.....

Conference Fees FUSION 2008

(Regular and Student registration include 1 copy of conference proceedings / CD-ROM, coffee-breaks, luncheons, Welcome Reception, Conference Dinner)

- | | | |
|--|--------------------------------|--------------------------------|
| Regular registration | <input type="checkbox"/> | EUR 770,-- |
| Student registration* (fulltime students only) | <input type="checkbox"/> | EUR 380,-- |
| 1 Tutorial | <input type="checkbox"/> | EUR 275,-- |
| 2 Tutorials | <input type="checkbox"/> | EUR 400,-- |
| 3 Tutorials | <input type="checkbox"/> | EUR 525,-- |
| Tutorial** | No 1 <input type="checkbox"/> | No 2 <input type="checkbox"/> |
| | No 3 <input type="checkbox"/> | No 4 <input type="checkbox"/> |
| | No 5 <input type="checkbox"/> | No 6 <input type="checkbox"/> |
| | No 7 <input type="checkbox"/> | No 8 <input type="checkbox"/> |
| | No 9 <input type="checkbox"/> | No 10 <input type="checkbox"/> |
| | No 11 <input type="checkbox"/> | No 13 <input type="checkbox"/> |
| | No 14 <input type="checkbox"/> | |
| Additional Conference Proceedings CD-ROM | <input type="checkbox"/> | EUR 10,-- |
| Additional Banquet Ticket | <input type="checkbox"/> | EUR 70,-- |
| Additional Welcome Reception Ticket | <input type="checkbox"/> | EUR 20,-- |

* Copy of membership/student certification required! Send it to VDE Conference Service by mail or Fax mentioning FUSION 2008.

** Please tick the appropriate box! Notice the Tutorial Schedule at www.fusion2008.org to avoid any time conflict!

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), 4 digits American Express

Expiration Date: ___ / ___

Holder's Name:

Date: Holders Signature: