

ISDT 2012
5th International Conference on
Integrated Systems, Design and Technology

Mallorca, Spain, 12-15 May, 2012



REGISTRATION

Scientific Organisation		
University of Siegen, Institute of Knowledge Based Systems & Knowledge Management Hölderlinstr. 3 57068 Siegen, Germany E-Mail: isdt@uni-siegen.de Fax-No.: +49 271 740 3038 Phone: +49 271 740 3037		

Personal Data (to be filled in block letters)	
Last Name:	Academic Degree/Title:
First Name:	
Institution:	E-Mail:
Phone:	Fax:
P.O. Box Street:	Website:
City: State/Province:	Zip/Postal Code: Country:

Accompanying Person:	
Last Name:	First Name:

Participant	
Conference registration & payment	Conference registration & payment - Industry participants
Before 25th of April, 2012 <input type="checkbox"/> 300,00 €	Before 25th of April, 2012 <input type="checkbox"/> 450,00 €
After 25th of April till 5th of May, 2012 <input type="checkbox"/> 350,00 €	After 25th of April till 5th of May, 2012 <input type="checkbox"/> 500,00 €
Conference registration & payment - Additional participant	Additional Paper
Before 25th of April, 2012 <input type="checkbox"/> 200,00 €	<input type="checkbox"/> 100,00 €
After 25th of April till 5th of May, 2012 <input type="checkbox"/> 250,00 €	

Payment	
<input type="checkbox"/> I will arrange the payment by bank transfer to the following account in Germany: Account holder: Universitätskasse Köln - Drittmittel Uni Siegen Bank: Sparkasse Siegen Bank identification code: 46050001 Account no.: 14 95 100 IBAN: DE25460500010001495100 S.W.I.F.T./BIC: WELADED1SIE Ref.: 32240-28211-12231402-Paper_number	
In case of a second paper from the same author, please comma separate the paper numbers!	
<input type="checkbox"/> I herewith authorise you to collect the invoice amount via my/my companies credit-card <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> American Express	
Credit card number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Valid thru	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>
Name of card holder:	_____

I herewith accept the conditions of registration, payment and cancellation stated on the official conference website www.isdt.uni-siegen.de

Place/Date: _____

Signature: _____