

VISUAL 2008, Salerno, Italy

11 -12 September 2008

REGISTRATION FORM

Registrant(s) Information:

Family/Surname		First Name	
Company, University or Other Affiliation		Mailing Address	
City		State/Province	
Postal Code		Country	
Phone Number		Fax Number	
Email address		VIS - number	

Registration Fees:

	Before 23 rd May		Onsite/After 23 rd May		Subtotal
Regular	€ 375	<input type="checkbox"/>	€ 450	<input type="checkbox"/>	
Student	€ 250	<input type="checkbox"/>	€ 300	<input type="checkbox"/>	
Additional Ticket	€ 70	n.	€ 70	n.	
Additional copy of proceedings	€ 50	n.	€ 50	n.	
Total amount					€ _____

Method of Payment	Bank Transfer
Date of Payment	
Paper Number Covered	
Short information on Payment*	VIS-

Beneficiary: Dipartimento di Matematica e Informatica
Account No: IT 54 R 03002 76210 000000002178
Bank Name: Banca di Roma
Swift Code: UNCRITMM
Bank Address: Sede di Fisciano (AG.INT.UNI.SA.)
Via Ponte Don Melillo
84084 Fisciano – (Salerno)
Italy

*In the payment details section, please write: "VIS-YourName-PaperNumber". For example: "VIS-VERDI-71" indicates paper # 71 by VERDI.