Symposium Registration Form 14th International Symposium on Formal Methods Hamilton, Ontario – August 21 - 28, 2006 – McMaster University



PLEASE PRINT CLEARLY (INDICATE SELECTIONS WITH "X")				POSTAL CODE/ZIP C	ODE	Country		
☐ MR. ☐ MISS ☐ MS. ☐ MRS. ☐ DR.				PHONE		Fax		
SURNAME			_	EMAIL				
GIVEN NAME(S)			_	NAME OF YOUR COMPANION(S), IF APPLICABLE				
CONTACT ADDRESS			_	Organization/Affiliation				
Сіту	Province/State			SELECTED ACCOMMODATION ^A				
REGISTRATION FEES			UNTIL JULY	47	AFTER JULY 7		AMOUNT	(\$CDN)
SELECT ONE OF: TECHNICAL SYMPOSIUM & INDUSTRY I TECHNICAL SYMPOSIUM & INDUSTRY I TUTORIAL / WORKSHOP REGISTRATIO FEES FOR TUTORIALSE	DAY, STUDENT ^C		\$650.00 \$350.00 \$50.00		\$750.00 \$400.00 \$50.00		\$ \$ \$	(1) (2) (3)
T1 – T10 (SPECIFY):	# TUTORIALS	x	\$100.00		\$150.00	=	\$\$	(4)
FEES FOR WORKSHOPS ^E W1 W2, W3 (SPECIFY):	# W2, W3	X	\$50.00 \$100.00		\$100.00 <u> </u>	= =	\$ \$	(5) (6)
W4			\$150.00		\$200.00	=	\$	(7)
OPTIONAL / ADDITIONAL PROCE CONFERENCE PROCEEDINGS RECEPTION EXCURSION & DINNER, AUGUST 24 EXCURSION, AUGUST 22F EXCURSION, AUGUST 26F	# COPIES # TICKETS	X X X		\$100.0 \$40.00 \$150.0 \$40.00))0)	= = = = =	\$ \$ \$ \$	(8) (9) (10) (11) (12)
TOTAL AMOUNT DUE (Sum Lines 1 to 12) G: \$ (13)								
AREFER TO http://fm06.mcmaster.ca for information on booking and payment for your accommodations Bincludes reception, excursion & dinner on august 24, and one copy of the proceedings Cincludes reception and one copy of the proceedings. Students must submit a photocopy of their valid student id card with their registration form Dapplies when participating in the workshops or tutorials only, but not the technical symposium Erefer to http://fm06.mcmaster.ca for information on tutorials and workshops Fithe optional full-day excursions to niagara falls on august 22 and 26 are subject to sufficient interest and have a limit on the number of participants. meals not included. Gincludes applicable taxes, 6% gst on lines (1) to (8) and 6%GST + 8%PST on lines (9) to (12)								
METHOD OF PAYMENT: Institutional Cheque payable to: McMaster University Visa Mastercard Bank Transfer FOR BANK TRANSFERS, PLEASE CONTACT THE CONFERENCE OFFICE BELOW FOR DETAILS. CREDIT CARD NUMBER: EXPIRY DATE: SIGNATURE/CARD HOLDER:								
CANCELLATION POLICY YOU MAY CANCEL YOUR REGISTRATION THROUGH JULY 7, 2006 AND RECEIVE A FULL REFUND LESS A \$50 SERVICE CHARGE. AFTER JULY 7, 2006, THERE WILL BE A \$150 SERVICE CHARGE TO ISSUE A REFUND. NO REFUNDS WILL BE ISSUED AFTER AUGUST 6, 2006.								
SPECIAL NEEDS:			<u>ځ</u>	DIETARY RESTRIC	CTIONS:			
Mail or fax completed registration form with payment to: Housing and Conference Services (Conference Office) McKay Hall, Room 124 McMaster University Fax: +1-905-525 9140 ext. 24781 McMaster University Fax: +1-905-529 3319 1280 Main Street West Hamilton, ON L8S 4K1 CANADA website: fm06.mcmaster.ca					For McMaster University Use Only: Date Received: Payment: No. Persons: Confirmation Sent:			