



Registration for SMDA 2009 / ICSF VII

Send it back by fax to: +49 (0)421 64 91 07 80

Personal data		
Mr/Ms	Family name	First name
Academic titel	University/Company	
Institute/Department	Street /P.O. Box	
Zip code	City	Country
Email	Phone	

1. Registration fee		
Delegate	<input type="radio"/> 400.00 €	€
Speaker	<input type="radio"/> 350.00 €	€
Sponsor	<input type="radio"/> 0.00 €	€
Staff member (FB 4)	<input type="radio"/> 150.00 €	€
Student	<input type="radio"/> 250.00 €	€
Sum		€

2. Social Program: Bremen Evening	
Join with us this traditional conference event during a boat trip on the river Weser.	
I'll take part <input type="checkbox"/>	free of charge

Payment by	
<input type="checkbox"/>	Cash on-site

<input type="checkbox"/>	Payment by debit entry (only with german bank account) With my signature as under I authorise <i>witago / Kerstin Biegemann</i> to charge my account upon confirmation with the sum total shown before as well as with all extra fees resulting out of rebookings.	
Account	Bank code	
Bank		
Account holder	Family name	First name

<input type="checkbox"/>	Credit card (only for participants from foreign countries) With my signature as under I authorise <i>witago / Kerstin Biegemann</i> to charge my credit card upon confirmation with the sum total shown before as well as with all extra fees resulting out of rebookings.	
MasterCard <input type="checkbox"/>	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"/>	Expiry date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Visa <input type="checkbox"/>	Proof number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(last three digits on the back side)
	Card holder: <input type="text"/>	
Date:	Signature:	