

Registration Form

Please fill in and send by fax to +32 2 650 56 09

Personal Information

First Name: _____

Last Name: _____

Affiliation: _____

Address: _____

Postal Code: _____ City: _____

Country: _____

Phone: _____ E-mail: _____

Are you author of a WISTP'09 paper? No Yes paper number: _____

Conference fees¹

		Total
Regular	1100 €	_____ €
Additional welcome reception	35 €	_____ €
Additional gala dinner	70 €	_____ €
Additional proceedings	80 €	_____ €
Additional social activity	30 €	_____ €
Grand Total		_____ €

You will pay by: Bank transfer Credit Card

¹ Registration fees are not refundable and include the accommodation, the coffee breaks, three lunches, the welcome reception, the gala dinner, the social activity and the proceedings

Payment by Bank transfer

Please pay your fee through an international bank transfer to:

Account holder: Université Libre de Bruxelles
 Account number: 210-0429400-33
 Bank name: BNP Fortis Bank
 Bank address: Agence Solbosch, Av. Paul Heger 22, 1050 Brussels, Belgium
 Swift/BIC code: GEBABEBB
 IBAN: BE79 2100 4294 0033
 Communication: FL051-4-R00000 - WISTP - your name

Payment by Credit Card

Amex Visa Mastercard Diner's

Credit card number: _____ - _____ - _____ - _____

Credit card owner's name: _____

Credit card expiry date: ____ / ____

Signature: _____