

**REGISTRATION FORM TO BE FAXED OR SENT TO:**

Anne-Lise CHARBONNIER at INRIA Nancy Grand Est  
615, rue du Jardin Botanique - 54600 Villers-lès-Nancy – France  
Fax: 03.83.27.56.52 - International: +33 3.83.27.56.52  
E-mail: Colloques@loria.fr

**Registration deadline:** Your registration form and payment must be **received** by **Wednesday, August 24, 2007**.

**Last name** (family name): \_\_\_\_\_ **First name:** \_\_\_\_\_  
**Title:** (Prof., Dr., other) \_\_\_\_\_ **Sex:** ☐ Male ☐ Female  
**E-mail:** \_\_\_\_\_  
**Affiliation:** \_\_\_\_\_  
**Citizenship:** \_\_\_\_\_ **Profession:** \_\_\_\_\_  
**Street & number:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_  
**Country:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Arrival date:** \_\_\_\_\_ **Departure date:** \_\_\_\_\_  
**Vegetarian Food:** ☐ yes ☐ no other: \_\_\_\_\_  
**I will participate in the excursion on September 16 (departure 1pm):** ☐ yes ☐ no

**Registration Fees include:** IFIP Working Group attendance, lunches, coffee breaks, social events, and gala dinner.  
(VAT 19,6% included)

<b>IFIP Working Group registration</b>	
Registration with lodging **	_ x 475 €
Registration without lodging	_ x 200 €
Social Events + Gala dinner for accompanying person	_ x 55 €
<b>Total:</b>	_____ €

\*\* Lodging and breakfasts in residence of high standing from September 16<sup>th</sup> (arrival) to September 20<sup>th</sup> (departure)  
(30 single rooms available).

If you wish to stay overnight from Saturday, September 15<sup>th</sup> to Sunday, September 16<sup>th</sup> or have any questions concerning the organization of the meeting, please send a mail to: [colloques@loria.fr](mailto:colloques@loria.fr)

**Payment (select one option)**

☐ **Please charge my credit card**

Card type: <input type="checkbox"/> Visa <input type="checkbox"/> Master Card
Credit card number: _____ Expiry date (month/year): ____/____
Amount: _____ €
Card holder name: _____
Card holder signature: _____

☐ **Please find enclosed a Bank Check** of .....Euros

Make checks (in Euros only) payable to “Agent Comptable de l’INRIA”

☐ **Bank transfer:**

A copy of the bank transfer should be enclosed with the registration form. Please quote **IFIP WG 2.2 2007** as reference.

Name of the Bank: Trésorerie Générale des Yvelines

Beneficiary: Agent comptable de l’INRIA

Address: 16, avenue de Saint Cloud – 78018 Versailles – France

Account number: 00001003958 – RIBKey : 48

Bank code: 10071 – Agency: 78000

Swift code: BDFEFRPPXXX - IBAN FR 76 1007 1780 0000 0010 0395 848

☐ **Bon de Commande** (For French Academic only) to INRIA Nancy Grand Est.

Siret number: 18 0089 047 00054

**Note:** To register, please FAX a copy of the filled form to the number and name indicated on the top. The completed form and your payment must be received by Friday, August 24<sup>th</sup>, 2007.