



Conference Registration World Congress 2009

September 7-12 2009 in Munich

Please complete and return this form to:

VDE-Conference Services, Stresemannallee 15, 60596 Frankfurt/Main / Germany
Fax: +49-(0)69 96 31 52 13 vde-conferences@vde.com

Mr Ms

Title:..... First Name:.....Surname:.....

Member-No.:Society:.....

Invoicing Address

Company:.....Dept:.....

Street No.:.....

Country:ZIP Code:.....City:.....

Phone:.....Fax:.....

e-mail:.....

Accompanying Person (Name, First Name)**:.....

Conference Fees (including 1 copy of proceedings (CD-ROM), coffee-breaks, welcome reception and Innovation@Night)

	Early Bird	July 15, 2009	Regular	after July 15, 2009
Speaker	<input type="checkbox"/> EUR	550,-	<input type="checkbox"/> EUR	650,-
Member*	<input type="checkbox"/> EUR	550,-	<input type="checkbox"/> EUR	650,-
Non-member	<input type="checkbox"/> EUR	660,-	<input type="checkbox"/> EUR	780,-
Student Registration*	<input type="checkbox"/> EUR	250,-	<input type="checkbox"/> EUR	300,-
Day Registration please indicate date: _____	<input type="checkbox"/> EUR	280,-	<input type="checkbox"/> EUR	320,-
Accompanying person**	<input type="checkbox"/> EUR	90,-	<input type="checkbox"/> EUR	90,-
Additional tickets for participants				
Bavaria@Night (Conference Dinner)	<input type="checkbox"/> EUR	50,-		
Munich@Night	<input type="checkbox"/> EUR	30,-		

*Copy of membership/student certification required!

** Participation in Social Programme only

Date: Signature:

Please supply full credit card information to avoid delay in registration!

Mastercard American Express Visa

Card No: □□□□ □□□□ □□□□ □□□□

Security No: □□□□ (last 3 digits on rear side of Credit Card/last 4 on AMEX Card)

Expiration Date: ___ / ___

Holder's Name:

Date: Holders Signature: