

## COMPSAC 2003 REGISTRATION FORM

- To register, complete and fax or post this form with full payment to:

Dazhi Huang  
Registration Chair

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Computer Science and Engineering Department  
Goldwater Center, Room 206  
Mail Code: 5406  
Tempe, AZ 85287-5406, USA

Fax: 1-480-965-2751  
Telephone: 1-480-965-3753  
Email: [dazhi.huang@asu.edu](mailto:dazhi.huang@asu.edu)

- Advance registration fee is applicable for registration received before **October 5, 2003**. Early registration is encouraged.
- Request for refund for cancellation of registration must be received before **October 5, 2003**. A service charge of \$100 will be deducted for each cancelled registration.

<i>ITEM</i>	<i>RATE</i>		<i>AMOUNT</i>
	<b>Advanced Registration (before October 5, 2003)</b>	<b>On-Site Registration (after October 5, 2003)</b>	
<b>Conference/Workshops: *</b>			
Members **	US \$500.00	US \$600.00	US \$_____
Non-Members	US \$625.00	US \$750.00	US \$_____
Student Members ***	US \$200.00	US \$250.00	US \$_____
<b>Each Additional Reception Ticket on November 3, 2003</b>	US \$30.00	US \$35.00	US \$_____
<b>Each Additional Banquet Ticket on November 4, 2003</b>	US \$60.00	US \$70.00	US \$_____
<b>Total Amount</b>			US \$_____

\* Registration fee includes admissions to all technical sessions of the conference and three workshops, a copy of the proceedings (including all conference and workshop papers), coffee breaks, conference reception, and banquet. Student registration fee includes admissions to all technical sessions of the conference and three workshops, a copy of the proceedings (including all conference and workshop papers), coffee breaks, but excludes conference reception and banquet.

\*\* IEEE Member or IEEE Computer Society Affiliate Member must include membership number in order to register at the member rate.  
IEEE or IEEE Computer Society Affiliate Membership No. \_\_\_\_\_

\*\*\* Student must be IEEE Student Member in order to register at the student rate.  
IEEE Student Membership No. \_\_\_\_\_

### **REGISTRANT INFORMATION**

Name: \_\_\_\_\_  
Last/Family                      First                      Middle Initial

Affiliation: \_\_\_\_\_

Internal Mailing Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### **PAYMENT INFORMATION**

Please pick one method of payment:

**Check:**

Checks must be drawn from a US bank and in US dollars only.  
Checks must be payable to "IEEE COMPSAC 2003"

**Credit Card:**

**Master** /  **Visa**

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card-Owner's Signature: \_\_\_\_\_

Total Amount: \_\_\_\_\_ Date: \_\_\_\_\_

**Bank Transfer:**

Please contact Dazhi Huang for the bank information.