**MSPN’2015 INSCRIPTION FORM**

**Please print this form and fill in with the required information.**

**And then, please return it by mail together with either your credit card information or a copy of the bank transfer to**

**E-mail: selma.boumerdassi@inria.fr**

Last Name (Family Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: Prof., Dr., Mr., Mrs., Miss., Ms. Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

University/Company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Province/State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal/ZipCode\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONFERENCE PARTICIPATION FEES:**

|  |  |  |
| --- | --- | --- |
|  | Early registration (before May, 20) | Late registration (after May, 20) |
| Student\* | 250 € | 350 € |
| Regular | 350 € | 450 € |
| Poster | 200 € | 250 €  |

\*Students must sent a copy of their student ID card

Payment by VISA or Mastercard.

VISA # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expire date(mm/yyyy) :

MASTERCARD # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expire date(mm/yyyy) :

Crypt Code # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name on card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date(mm/dd/yy):

Date (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cardholder’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OR, payment must be payable to ARCNAM and with the MSPN mention:

Name of Account: ARCNAM ILE DE FRANCE

IBAN: FR28 3000 2048 6400 0046 6202 C92

BIC/Swift Address: CRLYFRPP