

# 12<sup>th</sup> International Conference on Field Programmable Logic and Applications

La Grande Motte (Montpellier) - FRANCE - September 2-4, 2002

## REGISTRATION FORM

to return before June 15<sup>th</sup>, 2002



STE INTERNATIONALE DE CONGRES ET SERVICES - CSI Congrès

337, rue de la Combe Caude - 34090 Montpellier - FRANCE

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E-Mail : algsi@mnet.fr - or - algsi@wanadoo.fr

### Identification

Ms  Mrs  Mr (Fill out 1 form per participant. Please TYPE in BLOCK LETTERS).

NAME

First name

Affiliation  Function

Address

City  State

Zip code  Country

Phone (working hours): Country code/ city code/      
Fax: Country code/ City code/ number

E-mail

Write nothing here	Date de réception ..... N° congr. .... Règlement : <input type="checkbox"/> Chèque <input type="checkbox"/> B.C. <input type="checkbox"/> C.B. <input type="checkbox"/> V.B.
For administration	<input type="text"/>

REGISTRATION FEE	before June 15 <sup>th</sup>	after June 15 <sup>th</sup>	
Regular Registration Fee	420 €	480 €	= ..... €
Student Registration Fee	210 €	240 €	= ..... €
One Day Registration : on.....	180 €	200 €	= ..... €
Conference Dinner : included in the regular registration fee		= 1	<input type="checkbox"/> Present <input type="checkbox"/> Not Present

ACCOMPANYING PERSON(S)			
Conference Dinner, Cocktail	100 €	X ..... Nb	= ..... €
Spouse Program (see Web site)	100 €	X ..... Nb	= ..... €

ACCOMODATION							
Grade	Price* Single Room	Price* Double Room	Arrival Date	Departure Date	Nights' stay	Booking	
***	95 €	105 €	.....	.....	x ..... =	Payment in full	= ..... €
**NN	72,60 €	91,50 €	.....	.....	x ..... =	Payment in full	= ..... €

\* Prices include room, breakfast(s) and tourist tax

TOTAL owing ..... €

### PAYMENT MODALITIES (€uros only)

BANK CHEQUE payable to "CSI Congrès FPL'2002"

BANK TRANSFER (bearing the mention "free of charge to the receiver") to :

Bank Name: Société Bordelaise de CIC - 9, place de la Comédie - 34000 MONTPELLIER - FRANCE

Account Holder C.S.I. CONGRES - Bank Code 10057 - Office Code 02100 - Account Number 0102103071B -

RIB Key 25 - IBAN : FR90 1005 7021 0001 0210 3071B25

CREDIT CARDS accepted

VISA  MASTER CARD  EUROCARD

Card number

Expires (Month/Year)

Card owner :

Name

First name

Authorizes C.S.I. CONGRES to debit .....€uros to my credit card

Signature (mandatory) :

### CANCELLATION AND REIMBURSEMENT POLICY

Cancellation must be made in writing by postal mail to CSI Congrès (please include your bank account number along with full address for reimbursement).

Registration: Before June 30<sup>th</sup>, 2002, reimbursement of the amount paid after deduction of 23 € for administrative fee.

After this date, no reimbursement will be granted.

Accommodation: Before June 30<sup>th</sup>, 2002: reimbursement according to the hotel legislation.

After June 30<sup>th</sup>, 2002, no reimbursement granted unless the organisation succeeds in renting the room to another participant.

Accompanying Person(s): Before June 30<sup>th</sup>, 2002, reimbursement of the amount paid after deduction of 10 € for administrative fee.

After this date, no reimbursement will be granted.