



ICA 2009 REGISTRATION FORM

Please complete this form and return it to the Organizing Committee of ICA2009 by fax or e-mail:

Phone/Fax: +55 85 3261.1111
E-mail: roberta@ikone.com.br

Please type or write clearly in block letters.

Title: _____ First Name: _____ Last Name: _____			
Institution: _____			
Street Address: _____			
City: _____		State: _____ Zip Code: _____ Country: _____	
Phone: _____		Fax: _____ E-mail : _____	
Arrival Date: _____ at _____ (Rio or São Paulo Airport) with Flight N°: _____			

A. Registration Fees

Please mark which is applicable and indicate the quantity of each extra item when necessary.

CONFERENCE FEES		
	Up to February, 15 th	After February, 15 th
Professional	<input type="checkbox"/> € 450	<input type="checkbox"/> € 540
Student	<input type="checkbox"/> € 320	<input type="checkbox"/> € 370

Please indicate the paper number(s) covered by this registration: Paper # _____, Paper # _____

The Conference fees include:

- Attendance to all sessions;
- Conference Proceedings in CD-ROM;
- Conference Proceedings (Hard copy), Springer LNCS;
- Welcome party and coffee breaks;
- Gala Dinner.

EXTRA ITEMS	PRICE	QTY
Additional Printed Proceedings	€ 65	_____
Additional Gala Dinner	€ 55	_____
Transfer: Rio de Janeiro or São Paulo Airport → Paraty*	N/A	N/A
Transfer: Paraty → Rio de Janeiro or São Paulo Airport*	N/A	N/A

* To contract this option you should now contact paraty tours directly (<http://www.paratyours.com.br/ingles.asp>).

TOTAL (A) Conference Fees + Extra Items	€ _____
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SPONSORS:





IMPORTANT NOTES

- 1- For each accepted paper, at least one author must register by 15 February 2009;
- 2- Full registration (professional) covers up to two accepted papers;
- 3- Student registration covers one accepted paper (student identification is required to pay as student);
- 4- Transfer reservation can also be made directly with Paraty Tours (<http://paratytours.com.br>).

B. Hotel Reservation

Due to the successful number of registrations, the hotels previously listed in the website are no longer available. You should now contact paraty tours directly for other hotel options (<http://www.paratytours.com.br/ingles.asp>).

PAYMENT METHOD

Credit Card:

Credit card authorization form for payment by () Visa Credit Card	
* In this case is necessary present the card on Registration Desk	
Please, charge the amount due for the ICA 2009 to my Credit Card. Complete the data and send it to the FAX +55 85 3261.1111	
Amount Due [Total A]	
Credit card number:	
Name of credit Cardholder:	
Credit card expiration date:	
Security Code (last 3 numbers on the back of the credit card)	
Signature:	

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Bank Telegraphic Transfer:

Bank Telegraphic Transfer	
I have remitted the Amount Due from my Bank payable in REALS (copy enclosed) to the following account: Bank: Banco do Brasil Bank Code: 001 SWIFT: BRASBRRJFLA ou BRASBRRJRCE IBAN: 001 3653-6 6308196 Agency: 3.653-6 Account Number: 30.819-6 Address: Rua Paulino Nogueira, 271. CEP 60.020-270 Account's manager: Conceição (85) 3281.4766 I have written "ICA 2009" and my name and sent a copy of my remittance invoice or receipt together with the registration form by fax or email.	
Amount Due [Total A + EUR 50.00 (bank charge)]	
Bank:	
Date:	
Signature:	

Bank Deposit (only to Brazilian Banks):

Bank Deposit (only to Brazilian Banks)	
I have remitted the Amount Due from my Bank (copy enclosed) to the following account: Bank: Banco do Brasil Bank Nº: 001 Agency: 3.653-6 Account Number: 30.819-6 Beneficiary: FUNDAÇÃO CEARENSE DE PESQUISA E CULTURA CNPJ: 05.330.436/0001-62 I have written "ICA2009" and my name and sent a copy of my remittance invoice or receipt together with the registration form by fax or email.	
Amount Due [Total A]	
Date:	
Signature:	

Signature: _____ Date: _____

Please make one photocopy of this form for your own reference

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