

REGISTRATION FORM

ICSM2010

To confirm your registration, please complete this form including payment.

Name : _____

Passport / IC No. : _____

Designation : _____

Organisation : _____

Address : _____

Telephone : _____ Mobile : _____

Fax : _____ Email : _____

Company Details (for issuance of invoice):

Co. Reg. No* : _____ * if applicable

Contact Person : _____ Designation : _____

Please tick (/) in the appropriate box as below :

Are you presenting paper(s) :

Yes (Title) : _____

No

	Early Bird (before 15 August 2010)	Standard
<input type="checkbox"/> Presenter/ participant (Non- SAE member)	RM 750 / USD370	RM 790 / USD390
<input type="checkbox"/> Group package (Min of 3 pax from same organisation)	none	RM 590
<input type="checkbox"/> SAE Member	RM 610 / USD 285	RM 650 / USD 300
<input type="checkbox"/> SAE Students	RM 460 / USD 190	RM 490 / USD 200
<input type="checkbox"/> Student (Non- SAE member)	RM 610 / USD 285	RM 650 / USD 300

(including lunch & refreshments, door gifts, conference material and certificate only)

This registration is invalid without a signature. Payment must be made no later than 7 working days before the conference commences. Local order / undertaking letter may be accepted in cases where payment is delayed. However all payments must be made before the conference commences. Participants who have registered but do not attend will be invoiced accordingly.

Authorised Signature : _____ Date : _____

Name : _____ Designation : _____

Company's Stamp

MODE OF PAYMENT

A. Cheque or Bank Draft

Cheque No./ Bank Draft No. : _____ Bank/ Branch : _____

*All crossed cheque/ bank draft should be made payable to **SPACE UNIVERSITI TEKNOLOGI MALAYSIA**
Account Number : 0118-0001324-05-5 | Bank Name : CIMB Bank Berhad | Branch : UTM Skudai, Johor*

B. Credit Card

VISA I, hereby authorize Universiti Teknologi Malaysia to charge the total fee of to my credit card.

MASTER CARD Card Holder's Signature : _____
Card No. : _____
Expiry Date (MM/YY) : _____
CVV No. : _____

C. Telegraphic Transfer

Transaction Date: _____ Reference Number: _____

D. Local Order (LO / PO)

Reference Number : _____