



Policy 2006

Workshop on Policies for Distributed Systems and Networks (June 5th to 7th, 2006)

[The University of Western Ontario](#) London, Ontario CANADA

REGISTRATION FORM

Date _____ Dr. Prof. Mr. Ms. (Please check one)

Given Name: _____

Family Name: _____

Affiliation: _____

Address: _____

Email: _____ Telephone: _____

Fax: _____

Please choose the appropriate registration fee (in CDN\$)

	On or before May 5 th	After May 5 th
IEEE Members	\$ 395	\$ 495
Non-Members	\$ 495	\$ 595
IEEE Student Member	\$ 175	\$ 250
Student Non-Member	\$ 275	\$ 295

Social Event, Tuesday June 6th Yes, I will attend

Number of Extra Tickets (\$75 each) _____

Extra Proceedings (\$50 each) _____

Dietary Requirements: Vegetarian Kosher

Payment Options (GST# R108162587):

Visa: _____ MasterCard: _____ Cheque/Money Order: _____ Total Payment _____

Card# _____ Expiry Date: _____

Name on Card: _____

Please email, fax, phone, or mail in your registration with full payment to:
Email: meg@csd.uwo.ca Fax: +1 519 661 3515 Phone: +1 519 661-2111 ext 82086
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