

VECoS `2013
7th International Workshop on
Verification and Evaluation of
Computer and Communication Systems
Florence, 21-22 November 2013

REGISTRATION FORM

to be completed in block letters and sent to ENSTA PARISTECH
Catherine Le Golvan, 828 Boulevard des Maréchaux
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Tel: +33 (0) 1 81 87 20 40
Email: catherine.legolvan@ensta-paristech.fr

Last name

First name:

Company:

Address:

CityPostal/Zip code.....

Phone.....Fax.....

@mail:

Method of payment

Fee should be paid to the MEDLINK Secretariat by:

Bank transfer to: « MEDLINK » - CREDIT MUTUEL ILE-DE-FANCE

Cpte : 10278 06076 00020005141 37

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Please make reference to "VECoS 2013" and enclose a copy of your bank transfer

PAYMENT HAS TO BE MADE WITH THE INSTRUCTIONS "WITHOUT CHARGES TO THE BENEFICIARY"

Registration fees (in Euros)

- | | | |
|---------------------------------------|----------|--------------------------|
| • Participants | € 300.00 | <input type="checkbox"/> |
| • Discount fees | € 250.00 | <input type="checkbox"/> |
| • Accompanying Person for the banquet | € 60.00 | <input type="checkbox"/> |

** Students, second authors, local participants and those residing in Maghreb qualify for discount fees:*

The Registration fee for Participants includes: attendance at all scientific sessions, congress kit and proceedings hard copy, coffee breaks, lunches, banquet and certificate of attendance.

INVOICE TO (obligatory fields):

COMPANY/INSTITUTION NAME AND ADDRESS

Signature..... Date.....