REGISTRATION FORM

Please, return this form signed by fax or email to

“SPAA 2010 Registration”
Research Academic Computer Technology Institute (RACTI)
N. Kazantzakis str., 26504 Patras University Campus, Greece
Fax.: 00302610-960392, Tel.: 00302610-960300, Email: gourdoup@cti.gr
(only for questions, phone registration is not possible)
Attn.: Mrs Lena Gourdoupi

PLEASE PRINT CLEARLY

Name: ____________________________________________________________
☐ Mr.  ☐ Ms.  ☐ Dr.  ☐ Prof.  Last/Family Name  First/Given Name  MI

Organization/ Affiliation: ____________________________________________

Address/ Mail Stop: _________________________________________________

City: __________ State/ Province: __________ Zip: __________ Country: ______

Tax Number (if required on invoice)____________________________________

Daytime Phone: ___________________ Fax: _________________________

Email: ____________________________

Membership Number ACM: ____________________________________________

If student, Institution name (enclose proof of status): __________________________
The invoice/receipt will be issued at: ______ My name ______ Organization name

Please do not include my mailing address on: ______ Non-Society mailing lists ______ Meeting Participant List

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**SPAA 2010 Registration:** Registration includes daily admission to symposium sessions, symposium coffee breaks/lunches, welcome reception, one copy of the proceedings. Non-student registrations include admission to the symposium banquet.

<table>
<thead>
<tr>
<th>Early Registration (received by 13 May)</th>
<th>Late/On site Registration (received after 13 May)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACM Member</td>
<td>ACM Member</td>
</tr>
<tr>
<td>310 Euros</td>
<td>370 Euros</td>
</tr>
<tr>
<td>Non-ACM Member</td>
<td>Non-ACM Member</td>
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<tr>
<td>370 Euros</td>
<td>425 Euros</td>
</tr>
<tr>
<td>Student (no banquet)</td>
<td>Student (no banquet)</td>
</tr>
<tr>
<td>160 Euros</td>
<td>200 Euros</td>
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</tbody>
</table>

**Please indicate if you will attend:**

- ○ Banquet Dinner

In case extra tickets for the Banquet Dinner are needed, please indicate how many: ............... x 50 Euros = ................. Euros

**If you need to buy extra pages for the proceedings, cost:**

- ○ 75 Euros for one extra page
- ○ 150 Euros for two extra pages

Note that brief announcements can have up to one extra page and full papers can have up to two extra pages. Please complete paper title and authors: ..........................................................................................................................................................................................................................................................

**Amount due for SPAA 2010 Conference Registration:** Euro ____________

**Method of Payment (please select one):**

- ○ Bank Transfer to the account:
  Research Academic Computer Technology Institute,
  Piraeus Bank, Branch of Patras (Asklipiou)
  Bank Account No: 55 0700 7702 804
  IBAN: GR84 0172 5070 0055 0700 7702 804
  SWIFT code: PIRBGRAA
  [Please include copy of Bank Transfer order].

- ○ Master CARD    ○ Visa

Credit Card Number: ___________________________ Expiration Date: ___________

Please provide the three digit security code located on the back or your credit card (CVV2).

Cardholder Name: ______________________________ Signature: ________________

Credit Card Billing Address: __________________________

City: _________ State/Province: _________ Zip: _________ Country: ___________
*Notes:*
Payment must be enclosed. All payments must be in EURO. To qualify for the early registration rate, your registration form (sent by email or fax) and payment must be received by May 13, 2010. Registrations received after May 13, 2010 will be charged at the late/on-site registration rate; those received after the June 10, 2010 may not be acknowledged and will be required to register and pay onsite. Substitutions will not be permitted.

**Confirmation Letters**
RACTI is not responsible for faxes not received due to mechanical failure or circumstances beyond our control. Due to the high volume of faxes received, we are unable to confirm receipt immediately. Mail and fax registrations will be sent a confirmation letter by email if an email address is provided. Confirmations will be sent within 10 working days of receipt of registration form.

**Cance1lations**
Cancellations are allowed. However, full registration fees will be charged unless a cancellation notice is received in writing before or on May 26, 2010 to:

Research Academic Computer Technology Institute
Attn: SPAA 2010 Secretariat
Tel.: 00302610-960300
gourdoup@cti.gr

No fees will be refunded after this date. No-shows will be charged.

**Important Dates**
May 13, 2010  Early registration ends.
May 26, 2010  Cancellation deadline - All cancellations MUST be in writing.
June 10, 2010  After this date, registrations may not be acknowledged and interested attendees will be required to register and pay onsite.

**Questions**
Please email Mrs Lena Gourdoupi (gourdoup@cti.gr) or Prof. Christos Kaklamanis (ckakl@cti.gr) or call 00302610-960300 and reference SPAA 2010 Registration.