

PAPERCODE: _____

GAMEON-NA'2007

GAMEON-NA'2007 REGULAR PAPER REGISTRATION FORM
September 10-12, 2007, Gainesville-FL, USA

Please return this completed form with your manuscript

Author Registration Closes August 20th, 2007. For a paper to be printed in the Conference Proceedings, we must receive the copyright form(s) and paid registration for at least one author of each paper by that date. Each registration covers only 1 (one) paper

Author registrations will not be refunded, but may be transferred to a designee who will present the paper at the Conference.

Please legibly print or type and fill out completely.

NAME

LAST FIRST M.I

COMPANY OR AFFILIATION

Mailing address (tick one):

HOME BUSINESS

STREET

CITY

ZIPCODE COUNTRY

() / ()
TELEPHONE FAX

EMAIL

DATE SIGNATURE

A. AUTHOR REGISTRATION

1. BASIC REGISTRATION FEE. \$ 485

(Fees include all lunches, coffees, conference dinner and conference proceedings)

2. If your registration is AFTER 20th of August ADDITIONAL FEE \$ 50

B. Excess page fee \$ 60
For each page over 5, FIVE pages

C. Copying fee \$ 1 per copy page (if one copy of the paper is not included) \$ _____

(C. INVALID WHEN COPIES WERE SENT ELECTRONICALLY)

VAT Number if applicable: _____

REMITTANCE:

A. Registration Fee \$ _____

B. Excess Page Fee (see page 1 of author letter for instructions) \$ _____

C. Copying Fee (only if one copy of the paper is not included) \$ _____

TOTAL AMOUNT DUE \$ _____

ADD BANK CHARGE of \$ 10 in case you pay by BANK or CHEQUE. \$ _____

TOTAL AMOUNT REMITTED \$ _____

1) Make payment by BANK TRANSFER to account No. 001-4081477-84, ETI Bvba, FORTIS BANK, Branch Office Ghent Centre, Zonnestraat 2, B-9000 Ghent, Belgium. IBAN CODE: BE03 0014 0814 7784, SWIFT CODE: GEBABEBB : 001-4081477-84: MENTION YOUR NAME AND GAMEON-NA'2007 AND ADD A COPY OF PAYMENT TO THIS FORM

2) Or pay by CHEQUE and send it to Philippe Geril, Ghent University, Dept. Industr. Mgmt, Technologiepark 903, B-9052, Ghent, Zwijnaarde, Belgium.

3) Or pay by CREDITCARD: (amount deducted in € only)

Charge my (tick one)

Visa Euro/Mastercard American Express Diners

||| ||| ||| ||| |||
CARD NO. EXP.DATE

Authorizing Signature

PRINT SIGNATURE

PURCHASE ORDERS ARE NOT ACCEPTED

FAXED CREDIT CARD INFORMATION IS NOT ACCEPTED. FAXED CREDIT CARD DATA NEED TO BE BACKED UP BY A MAILED COPY.

MAIL REGISTRATION FORM AND PAYMENT FORM COPY (1) / CHEQUE (2) / CREDITCARD INFO (3) TO: Philippe Geril, European Simulation Office, European Simulation Office, Ghent University, Dept. Industr. Mgmt, Technologiepark 903, B-9052, Ghent, Zwijnaarde, Belgium.