CONFERENCE REGISTRATION FORM - KR’98


First Name: _____________________ Last Name: _______________________________________
Affiliation: _______________________________________________________________________
Address (Zip Code/City/Country): _____________________________________________________
_______________________________________________________________________________
Phone number: ______________________________ Fax number: __________________________
E-mail: __________________________________________________________________________

KR’98 REGISTRATION

KR’98 early registration
(Postmarked or faxed by April 30, 1998)
❑ Regular 550,000 Italian lire
❑ Student * 300,000 Italian lire

KR’98 late or on-site registration
(Postmarked or faxed after April 30, 1998)
❑ Regular 800,000 Italian lire
❑ Student * 400,000 Italian lire

WORKSHOPS REGISTRATION

❑ NM’98 ❑ Regular 144,000 Italian lire
❑ Student * 50,000 Italian lire
❑ KRIMS II 76,000 Italian lire
❑ KBS V&V’98 70,000 Italian lire
❑ KRNL’98 75,000 Italian lire
❑ DL’98 no fee (tick to register)
❑ FOIS’98 180,000 Italian lire

* Students must send legible proof of full-time student status.

EXTRA COPIES OF PROCEEDINGS

❑ FOIS’98 Quantity _____ each copy 100,000 Italian lire

Grand Total ____________________ Italian lire

PAYMENT

Without charges for the beneficiary, to the order of ITC . Please indicate which method are you using.

<table>
<thead>
<tr>
<th>Bank Transfer</th>
<th>International Check</th>
<th>VISA Credit Card</th>
<th>MasterCard Credit Card</th>
<th>American Express Credit Card</th>
</tr>
</thead>
</table>

BANK TRANSFER to CARITRO Bank - Sede di Trento, Via Galilei 1, Account n. 6190/ITES (ITC), ABI 6330 - CAB 1800 (swift code CRTNIT2T). It should be made net of all bank charges and commission. A copy of the bank transfer order should be postmarked or faxed together with the registration form.

INTERNATIONAL CHECK payable to the order of ITC - Istituto Trentino di Cultura.

CREDIT CARD: Add 6% to the Grand Total for credit card fees.

Credit Card Number _______________________________________________________________
Expiration Date ___________________________________________________________________
Name as it appears on card _________________________________________________________
Please charge my credit card for the amount of __________________________________ Italian lire
(please insert here the Grand Total + 6%)

Signature _______________________________________________________________________

(This form is also available at http://www.kr.org/kr/kr98/)