

ISQED REGISTRATION FORM

2011 International Symposium on Quality Electronic Design

March 14-16, 2011, Hyatt Regency Hotel, Santa Clara, CA

You can either register online at www.isqed.org or complete this form and fax or mail it. Do not register online and send in this form. It will result in duplicate bill-

For Office Use Only	
Deposit #: _____	Refund: _____
Date: _____	Date: _____
Check #: _____	
Amount: \$ _____	

Last Name _____ First Name _____

Company/University _____

Address _____

City _____ State/Country _____ Zip Code _____

Work Phone (____) _____ Fax (____) _____ Email _____

IEEE/ACM Membership #:

Student ID#:

University Contact Person:

Registration Type	Registration Category	Advance Registration (postmarked by March 2, 2011)	After March 2 or at the Conference	Total Due
Conference Technical Sessions (Tuesday - Wednesday) Fee includes admission to Panels, Tues. - Wed. sessions, and one copy of the conference proceedings. Does not include admission to Mon. Tutorials.	Member IEEE	.....\$620	.....\$710	\$.....
	Member ACM	.....\$620	.....\$710	\$.....
	Non-Member	.....\$690	.....\$790	\$.....
	Full Time Student	.....\$350	.....\$380	\$.....
			Total Registration \$	\$ _____
Tutorials (Monday) Fee includes admission to all tutorials on Mon., one copy of the tutorials workbook and one Mon. lunch ticket	Member/Non-member Full Time Student	.....\$280	.....\$300	\$ _____
		.....\$280	.....\$300	\$ _____
			Total Tutorial \$	\$ _____
Panel Discussion & Lunch LP1 (Wednesday) Fee includes admission to the panel discussion and lunch	All	.....\$75	.....\$75	\$ _____
			Total Panels \$	\$ _____
Miscellaneous	Tickets for extra:			
	CD of Proceeding	.....\$50	.....\$50	\$.....
	Extra Panel Lunch	.....\$65	.....\$70	\$.....
	Extra Tuesday Lunch	.....\$65	.....\$70	\$.....
			Total Misc. \$	\$ _____
			Grand Total Enclosed	\$ _____

Registration payment can be made by credit card (MasterCard, VISA, AmEx, Discover only) or check (US dollars on a US Bank).

Make checks payable to ISQED.

- Payment must be enclosed to process this form
- Faxes accepted with credit card payment ONLY
- Requests for cancellations or refunds must be received by March 5
- A \$100 processing fee will be withheld from all refunds

Payment Method:

_____ Check (payable to ISQED, US \$\$ on US Bank)

_____ Wire Money (contact ISQED for wiring information)

_____ Credit Card (MasterCard, VISA, AmEx, Discover)

Card Number
Expiration Date

Name on the Card
Card Holder's Billing Address

Signature

Mail or fax this form and payment to:

ISQED
1149 Jamestown Drive
Sunnyvale, CA 94087
Fax: (408) 516-8228

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IT MIGHT RESULT IN DUPLICATE CHARGING**