

MITIP 2007

9th International conference on
The Modern Information Technology in the
Innovation Processes of the Industrial Enterprises
September 6-7, 2007, Firenze, Italy.

REGISTRATION FORM

Please complete in CAPITAL LETTERS and return by 20 June 2007 to profit from the early registration fee.

FAMILY NAME:

FIRST NAME:

Nationality:

Institution:

Address:

Post code: City: Nation:

Ph.: Fax:

e-mail:

	Early registration fee Payment by 20 June 2007	Late registration fee
▪ Student	<input type="checkbox"/> € 250,00	<input type="checkbox"/> € 300,00
▪ Non Student	<input type="checkbox"/> € 350,00	<input type="checkbox"/> € 400,00
Total amount due for conference registration: € _____		

Conference dinner	
Please sign YES if you plan to attend the conference dinner. The conference dinner is included in the registration fee.	Participation: <input type="checkbox"/> YES <input type="checkbox"/> NO
Please indicate the number of accompanying guests that will participate in the conference dinner. The price of the conference dinner is €60 for each of your guest.	N° of accompanying guests: _____
Total amount due for accompanying guests' conference dinner: € _____	

1. Payment by credit card

Card holder's name: date of birth: __/__/__

<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Card expiration date: __/__/__	Authorised signature: _____

2. Payment by bank transfer (the operation must be free of charges for the beneficiary):

Beneficiary: **Università di Firenze**
IBAN bank account number : **IT 75 Y 03400 02800 000009500281**
Bank name and address: **Banca Toscana, via del Corso 6, Firenze**
BIC (SWIFT code): **TOSCIT3F200**
Please specify **"MITIP 2007 + FAMILY NAME + FIRST NAME"**

Please return to Marie-Helene Piette, Università di Firenze
Fax: +39-055-4598 949 - email: convegni@polobiotec.unifi.it
For bank transfer payments, a copy of the bank receipt must be faxed together with this form.