

**REGISTRATION FEES FORM - V Southern Programmable Logic Conference**

April 1 to 3, 2009 - São Carlos – SP – Brazil

**1. General information**

Last Name	<input type="text"/>	First Name	<input type="text"/>
City	<input type="text"/>	State / Country	<input type="text"/>
Phone	<input type="text"/>	Fax	<input type="text"/>
Email	<input type="text"/>		
Institution	<input type="text"/>		
Presenting Paper Yes/No	<input type="text"/>		
Paper Title/No.	<input type="text"/>		

**2. Fees:** Please mark which fee is applicable for you.

Category	(by January 26 <sup>th</sup> , 2009)		(after January 26 <sup>th</sup> , 2009)		Subtotal
		IEEE member		IEEE member	
<b>Regular</b>	<b>330 euros</b>	<b>290 euros</b>	<b>390 euros</b>	<b>350 euros</b>	
<b>Designer Forum</b>	<b>220 euros</b>	<b>190 euros</b>	<b>260 euros</b>	<b>230 euros</b>	
<b>Total:</b>					

**3. Payment:** Full payment before the given deadline is recommended. Payments must be made in Euros (or equivalent value in other currencies). Please fill all blank spaces and send this form by Fax to + 55 16 3371 2020, or a scanned version by email [fafqsc@gmail.com](mailto:fafqsc@gmail.com).

**Bank order:** data available in Registration on the conference's Web Page.

**Credit Card VISA:** The charge will appear in your account statement as FAFQ – Fundação de apoio à Física e à Química.

Please Fill all the information requested

Card Holder Name	<input type="text"/>																			
Card No.	<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"/>	<input type="text"/>	Exp. date	<input type="text"/>	<input type="text"/>
Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	3 digits PIN code on the back of the card																

CARD HOLDER SIGNATURE I authorize the charge to my credit card given

Please charge to my credit card the amount of:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(Euros)
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	---------

Please fill this form and send it by FAX to FAFQ: - Fundação de Apoio à Física e à Química, Av. Dr. Carlos Botelho, 1465 – CEP. 13560-250, Fax: +55-16-3371-2020 email: [fafqsc@gmail.com](mailto:fafqsc@gmail.com)