IEEE Information Theory Workshop, June 27-July 1, 1999 REGISTRATION AND ACCOMODATION FORM

<u>NOTE:</u> Participants are advised to make their reservations as soon as possible in order to guarantee hotel room in Athens. Also, please note that hotel rooms in Metsovo will be assigned on a first-come first-served basis.

Please complete in CAPITALS and send by fax or post-office mail to the following address: EGNATIA EPIRUS FOUNDATION, ATTN. MRS. I. CHRISOLORA CHATZIGIANNI MEXI 9, ATHENS 115 28, **GREECE** Tel.: +(30 1) 72 91 406 Fax: +(30 1) 72 43 145 Else, you can complete this form and send it by e-mail to: found@met.forthnet.gr 1. Participant's Information. Last Name:____ Institution/Company:____ ____Department: 2. Registration Fees. Please see the REGISTRATION, TRANSPORTATION AND ACCOMODATION INFORMATION form for cancellation policy. **IEEE Members:** membership #: non IEEE members ☐ **Early** (until <u>May 10</u>) 75,000 GDRs ☐ **Early** (until <u>May 10</u>) 90,000 GDRs ☐ **Late** (after May 10) 90,000 GDRs ☐ **Late** (after May 10) 105,000 GDRs ☐ Accompanying persons fee: 30,000 GDRs X #persons = 3. Accommodation in Athens. Please see the REGISTRATION, TRANSPORTATION AND ACCOMODATION INFORMATION form for cancellation policy. ☐ Hilton ☐ Divani Caravel ☐ Holiday Inn ☐ Golden Age ☐ Riva ☐ Alexandros □ Single room ____ GDRs □ Double room ___ GDRs □ Extra Bed ___ GDRs Before Metsovo: Date of arrival: ______ Date of departure: 4. Round trip bus transfer from Athens to Metsovo. \square Fee: 8,000 GDRs per person X #persons = 5. Accommodation in Metsovo. Please see the REGISTRATION, TRANSPORTATION AND ACCOMODATION INFORMATION form for cancellation policy. □ Single room 15,000 GDRs □ Double room 19,500 GDRs □ Extra Bed_3,900____GDRs Date of arrival:______Date from departure:_____ 6. If flying to/from Ioannina please write below. Departure Flight # / Date:_____. Arrival Flight # / Date: Total to be paid in GDRs: 7. Payment Method (Please note that reservation cannot be confirmed until wire transfers arrive). ☐ Please charge my credit card ☐ Visa ☐ American Express ☐ Mastercard ☐ Diners Credit Card Number: _____Expiration date: ______
Name on Credit Card: _____Signature of Cardholder: ______ ☐ Wire Transfer (see *REGISTRATION*, *TRANSPORTATION AND ACCOMODATION INFORMATION* form for details).