

# REGISTRATION FORM



## **GENERAL INSTRUCTIONS**

- Fill in and send this Registration Form to [ssbse2014@uece.br](mailto:ssbse2014@uece.br).
- In case you select Bank Transfer as payment option, attach the bank transfer order/receipt.
- Registration fees and payment information are described in [www.ssbse.org](http://www.ssbse.org).
- In case you wish to pay by Bank Transfer and are not sure about the exact fee you should pay, please contact the conference chair ([ssbse2014@uece.br](mailto:ssbse2014@uece.br)) to have the correct information before making your payment.

## **PERSONAL INFORMATION**

Title:	Full Name:
Name you want on your badge:	
Affiliation:	
Address:	
City:	Country:
E-mail:	Phone Number:

## **REGISTRATION INFORMATION**

Participant Profile:	<input type="checkbox"/> Professional <input type="checkbox"/> Student	Registration Package:	<input type="checkbox"/> All Inclusive <input type="checkbox"/> Conference Only
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## **IN CASE OF "ALL INCLUSIVE"**

Room Occupancy:	<input type="checkbox"/> Single Room <input type="checkbox"/> Double Room <input type="checkbox"/> Triple Room	# of Accompanying People:	<input type="checkbox"/> None <input type="checkbox"/> 1 person <input type="checkbox"/> 2 persons
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## **PERSONAL INFORMATION ON ACCOMPANYING PEOPLE**

Name:	Name:
Relationship:	Relationship:
Age (in years):	Age (in years):

## **PAYMENT INFORMATION**

Payment Option:	<input type="checkbox"/> Bank Transfer <input type="checkbox"/> Credit Card
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