

CODATA Course on Information Visualization – REGISTRATION FORM

28 September 2002, Montreal

Delta Centre -Ville, 777 rue University Street, Montréal, Québec, Canada

Tel (514) 879-1370 – Fax (514) 879-1831 – <http://www.deltahotels.com>

Title: _____ Last Name _____

Name _____

Company/Affiliation: _____

Address: _____

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Phone: _____ Fax _____ E-mail _____

Personal rate Registration Course (in US\$): 180 US\$

Special reduced academics or students 120 US\$

Total amount Payable _____

Payment in US\$ must accompany this form and be sent (see address below) by either

I enclose check/money order made payable to CODATA
CODATA Secretariat, 51 Bld de Montmorency, 75016 Paris

I will arrange a Bank Transfer in the following account
Account Name: CODATA Name of Bank: BRED Banque
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Account No: 10107 00116 00110160850 03 SWIFT Code: BRED FR PP

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This form and check or money order (if applicable) must be sent to:

Mrs. Kathleen Cass CODATA Secretariat 51 Boulevard de Montmorency F - 75016 Paris France Phone: +33 1 45 25 04 96 Fax: +33 1 42 88 14 66 E-mail: codata2002@dial.oleane.com	With a copy to Dr. J.J. Royer LIAD/CRPG-CNRS/ENSG, Bat G Rue du Doyen Marcel Roubault, BP 40 54501 Vandoeuvre-Lès-Nancy, Cedex France Phone: +33 3 83 59 64 28/35 Fax: +33 3 83 59 64 60 E-mail: royer@crpg.cnrs-nancy.fr
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