



## REGISTRATION FORM

# ACM Solid & Physical Modelling Symposium

**ACM SPM'06  
6-8 JUNE 2006**

### **PARTICIPANT INFORMATION**

**TITLE:**

**FIRST NAME:**

**SURNAME:**

**JOB TITLE:**

**WORK**

**ADDRESS:**

**TELEPHONE:**

**FAX:**

**EMAIL:**

**Name and telephone number of person whom should be contacted in an emergency**

**SPECIAL REQUIREMENTS:**

Dietary or other

### **REGISTRATION/CONFERENCE FEE**

#### **EARLY REGISTRATION ~ to be completed and returned by 1 April 2006**

- |                    |                               |
|--------------------|-------------------------------|
| ~ REGISTRATION FEE | <input type="checkbox"/> £285 |
| ~ ACM/SIG MEMBER   | <input type="checkbox"/> £255 |
| ~ STUDENT          | <input type="checkbox"/> £115 |

~ ORGANISING COMMITTEE / PANELIST / INVITED SPEAKER     

#### **LATE REGISTRATION ~ completed after 1 April 2006**

- |                    |                               |
|--------------------|-------------------------------|
| ~ REGISTRATION FEE | <input type="checkbox"/> £340 |
| ~ ACM/SIG MEMBER   | <input type="checkbox"/> £310 |
| ~ STUDENT          | <input type="checkbox"/> £125 |

~ OPTIONAL CONFERENCE DINNER  
on Wednesday 7<sup>TH</sup> June 2006       £35

**The full registration fee will cover attendance, registration pack, book of abstracts, lunches and all refreshments during the conference.**

## **ACCOMMODATION**

No University accommodation is available therefore all delegates are requested to book accommodation in advance at local hotels. A list of hotels in walking distance to the conference venue can be found on the website (<http://ralph.cs.cf.ac.uk/SPM06registration.html>). Alternatively accommodation can also be found at <http://www.visitcardiff.com>

## **PLEASE INDICATE METHOD OF PAYMENT:**

~ **CHEQUES** are to be made payable to Cardiff University in Great British Pounds GBP £

~ **CREDIT/DEBIT CARD**

Please note that only VISA DELTA, VISA, MASTERCARD, MAESTRO, and SOLO cards can be accepted. We **DO NOT** accept American Express.

## **COMPLETION OF THIS FORM INDICATES PERMISSION TO DEBIT YOUR CARD**

	<b>CARDHOLDER NAME:</b>	
	<b>CARD NUMBER:</b>	
	<b>START DATE:</b>	
	<b>EXPIRY DATE:</b>	
	<b>ISSUE NUMBER:</b> <b>(Maestro Only)</b>	
	<b>SECURITY NUMBER:</b> <b>(Last 3 digits on back of card)</b>	
	<b>POSTCODE:</b> <b>(Numbers only)</b>	

**PLEASE NOTE – CHEQUES ARE TO BE SENT WITH THE COMPLETED REGISTRATION FORM**

## **PLEASE COMPLETE AND RETURN TO:**

Samantha Emmott, Conference Manager  
Cardiff University, Southgate House, PO Box 533, Cardiff CF14 3XZ  
Telephone Number: +44 (0)29 20 87 5117 Fax Number: +44 (0)29 2087 4990  
Email: [Emmotts@Cardiff.ac.uk](mailto:Emmotts@Cardiff.ac.uk)

**Signature:**

**Date:**

**THE DEADLINE DATE FOR THE RECEIPT OF COMPLETED REGISTRATION FORMS  
FOR EARLY REGISTRATION IS 1ST APRIL 2006.**

**PLEASE NOTE FULL REFUNDS ARE AVAILABLE LESS A £20 ADMINISTRATION FEE  
UNTIL TUESDAY 9<sup>TH</sup> MAY 2006 – NO REFUNDS AFTER THIS DATE.**