ISIICT 2007 REGISTRATION FORM

(Bank information will be provided)

To be returned to Faculty of Information Technology, Philadelphia University,

By fax to: 00962 2 6374364

Or mail to: sghoul@philadelphia.edu.jo

Participant (Please use one form per participant) :

Last (Family) Name: _____ First (Given) Name:_____

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Registration Fee for ISIICT 2007

Before January 16, 2007

Registrations fees include admission to the technical sessions, proceedings, coffee breaks, lunches.

All prices are given in US dollar ($)

Participant	On or before February 15, 2007	after February 1, 2007
Regular	250	300
Student	100	150

Method of Payment

(Payment must accompany registration form)

Please indicate your method of payment by checking the appropriate box:
[ ] Cheque in Jordan funds drawn on a bank (PLEASE ENCLOSE WITH THIS FORM)
Credit card authorization:
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Please state your name and the symposium reference (ISIICT 2007) on all
transactions.