

2007 Postgraduate Electrical Engineering and Computing Symposium (PEECS 2007)

7th November 2007

Curtin University of Technology

REGISTRATION FORM

Please complete and return this form together with your payment, to your **PEECS 2007 representative as you submit the final version of your paper by 18th October 2007.**

Halit Eren (Curtin University) **FAX: 9266 7903 TEL: 9266 2584**
 Sieteng Soh (Curtin University)
 Kevin Wong (Murdoch, IT)
 Peng Lam (ECU, SCIS)
 Stefan Lachowicz (ECU, Engineering)
 King Sun Chan (Curtin) **FAX: 9266 7903 TEL: 9266 2584**
 Farid Boussaid (UWA, Engineering)

Delegates external to these institutions should send this form together with payment (payable to Curtin University) to:
 Dr. Halit Eren Department of Electrical Engineering, Curtin University of Technology, Kent St., Bentley, WA 6102.

PERSONAL PARTICULARS (Please type or print clearly):

TITLE: Prof. Dr Mr Mrs Ms Miss
 FAMILY NAME: GIVEN NAMES.....
 PREFERRED NAME ON BADGE
 AFFILIATION:
 FULL MAILING ADDRESS.....

 POST CODE:
 TELEPHONE: FAX:

REGISTRATION FEES:		Attending Dinner ?
<input type="checkbox"/> Author (ONE PRESENTER ONLY)*	\$ 0	Y / N
<input type="checkbox"/> Staff / Student from affiliated institutions	\$ 90.00	Y / N
<input type="checkbox"/> Others	\$ 100.00	Y / N
<input type="checkbox"/> Symposium Dinner Only (please supply name of Guest)	\$ 50.00	Name of Guest: _____
TOTAL AMOUNT	\$	

Registration includes Conference Proceedings, Tea, Lunch and Symposium Dinner.

For catering purpose, please kindly indicate whether you will attend the Symposium Dinner.

(Symposium Dinner at Curtin on Park, Kent Street Bentley, WA 6102.)

Method of payment: Cheque Credit Card Direct Debit

Cheques should be made payable to "*Curtin University*".

Credit Card payment: Credit Card Type: Master Card Visa Card

Amount paid: \$ _____

Card Number: _____ Expiry date: _____

Name on card: _____ Signature: _____

Details for Direct Debit are available from Halit Eren upon request.

PARTICIPANT SIGNATURE **DATE**