Registration Form "Lunteren 2000"

Name	:
Affiliation	:
Department	:
Address	:
Postal code	:
City	:
Telephone	:
Electronic mail	:

Full AIO/OIO/TWAIO Arrangement (tag your choices; calculate your fee)	*Fee*
☐ I am an 'LNMB-aio/oio/twaio' **and attend the entire meeting** including the seminar on Friday. (Price includes registration fee, lodging and meals)	Dfl. 490,–
☐ I would like a single room (Dfl. 94,50 extra charge)	Dfl. ,–
REDUCED AIO/OIO/TWAIO FEE	Dfl.

Standard reservation (tag and circle your choices; calculate your fees)	*Fee*
☐ I will attend the meeting during the following day(s): (Dfl. 45,– per day, incl. coffee, tea, and lunch) *Tuesday / Wednesday / Thursday / Friday*	Dfl. ,–
registration fee	Dfl. 50,–
☐ I will attend dinner on the following day(s): (Dfl. 42,50 per dinner) *Tuesday / Wednesday / Thursday*	Dfl. ,–
☐ I wish to reserve a *single/double* room for the following night(s): (single room: Dfl. 110,50 per room per night; double room: Dfl. 78,50 per person per night) *Tuesday night / Wednesday night / Thursday night*	Dfl. ,–
TOTAL FEE	Dfl. ,–

Room mate

☐ I wish to share my room with ______________________________

Date:	Signature:

We will not send invoices. *So please, transfer your fees when sending this form.* We will not send confirmations either. In case you wish to check your registration or when you wish to receive a receipt for your fees, contact Mrs. Lieke Schulze (lieke@cwi.nl, +31-20-5924189).

Return form *before December 17, 1999,* to:	Transer total amount due *before December 31, 1999,* to:	**Please, fill out this box too**
Mrs. L. Schultze CWI P.O. Box 94079 1090 GB Amsterdam	Account: RABO 39.35.20.250 LWMBS Conf. Math, Oper. Amsterdam	Name: Aff.: Amount transferred: Dfl.

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