

## REGISTRATION FORM "LUNTEREN 2006"

Family name : .....

First Name : .....

Affiliation : .....

Address : .....

Postal Code: ..... City: .....

Telephone : ..... E-mail address: .....

Date : ..... Signature: .....

### Full Ph.D. Arrangement (tag your choices)

Fee

- I am LNMB PhD student and **attend the entire meeting** including the seminar on Thursday (Price includes registration fee, lodging in double room, meals and € 50,- reduction paid by the LNMB) ; Price: € 280,- € .....
- I would like a single room (€ 50,- extra charge) ; Price: € 330,- € .....

### Standard reservation (tag your choices; calculate your fee)

Fee

- Registration fee € 40,-
- I will attend the conference on Tuesday (incl. coffee, tea and lunch); Price: € 37,50 € .....
- I will attend the conference on Wednesday (incl. coffee, tea and lunch); Price: € 37,50 € .....
- I will attend the seminar on Thursday (incl. coffee, tea, lunch and drinks); Price: € 50,- € .....
- I will attend dinner on Tuesday; Price: € 32,50 € .....
- I will attend dinner on Wednesday; Price: € 32,50 € .....
- I wish to reserve a single room for Tuesday night (incl. breakfast); Price € 75,- € .....
- I wish to reserve a single room for Wednesday night (incl. breakfast); Price € 75,- € .....
- I wish to reserve a double room for Tuesday night (p.p. incl. breakfast); Price € 50,- € .....
- I wish to reserve a double room for Wednesday night (p.p. incl. breakfast); Price € 50,- € .....

In case you share a room: Room mate: .....

**TOTAL FEE (please, fill in your total fee)**

€ .....

We don't send invoices or confirmations. In case you wish to check your registration look at the LNMB website [www.lnmb.nl/conferences/lunteren2006/participants.html](http://www.lnmb.nl/conferences/lunteren2006/participants.html); when you wish to receive a receipt for the fee, send an e-mail to [lnmb@math.leidenuniv.nl](mailto:lnmb@math.leidenuniv.nl).

**Transfer your fee ultimately December 16** to bank account 85.79.82.990 of Maastricht University with the notes: "no. 35010010 N" (this number is required) and "fee LNMB/Lunteren 2006 for ..... (fill in the name(s))".

Please, return this form **ultimately December 16**, to:

Prof.dr. L.C.M. Kallenberg, Mathematical Institute, Leiden University, PO Box 9512, 2300 RA Leiden.