

ACM Symposium on Information, Computer and Communications Security Registration Form

(Advance Registration Cutoff Date: February. 10, 2006)

Participant Information (Please type or print clearly)

Courteous Title: Mr. Ms. Mrs. Prof. Dr.

Last Name _____ First Name _____ Middle Name _____

Name on Badge _____

Job Title _____ Department _____

Company / Organization _____

Mailing Address _____

City _____ Zip Code _____ Country _____

Telephone _____ (*include Country Code, ex:+886-3-5152696 ext32) Fax _____

E-mail (1) _____

Receipt Title _____ (Note: your name and affiliation on badge will
appear on the receipt, unless indicated otherwise)

Category Member of ACM, Membership No: _____ Non-Member
 Student

Paper ID _____ (if you do not present a paper, it is unnecessary)

Special Requirement Vegetarian Others _____

Free Tour Program Yes (Program A__ / Program B__) ([view the program](#)) No

Registration Fee

Registration Type	By Feb. 10, 2006	After Feb. 10, 2006
ACM Member	<input type="checkbox"/> US\$400	<input type="checkbox"/> US\$475
CCISA Member	<input type="checkbox"/> US\$400	<input type="checkbox"/> US\$475
Non-ACM Member	<input type="checkbox"/> US\$425	<input type="checkbox"/> US\$500
Student	<input type="checkbox"/> US\$250	<input type="checkbox"/> US\$300
Additional Banquet Ticket	<input type="checkbox"/> US\$66 x () ticket(s)	<input type="checkbox"/> US\$66 x () ticket(s)
Additional Proceedings	<input type="checkbox"/> US\$21 x () proceeding(s)	<input type="checkbox"/> US\$21 x () proceeding(s)
Additional page	<input type="checkbox"/> US\$200/per page (2 pages max)	<input type="checkbox"/> US\$200
TOTAL AMOUNT (US\$)		

- Registration includes: Proceedings · Welcome Reception · Daily Lunch · Coffee Breaks and Banquet

Cancellation and Refund Policy

Any cancellation must be notified to the secretariat in written form. Please refer to the following cutoff dates for cancellation. All refund will be made after the symposium. Bank and service charges will be deducted from the refunded amount. Substitutes are permitted.

Cancellation by February 20, 2006 70% refund

Cancellation after February 20, 2006 No refund

Payment

Payment of the registration fee can be made either by credit card or bank wire transfer.

Credit Card

Card Type VISA Master American Express

Name of Issuing Bank _____

Card No.

Expire Date: _____ (Month/Year)

3-digit code: _____ (on the back card, inside the signature area, the last three digits)

Cardholder's Name: _____

Cardholder's Signature: _____

****To ensure security, your credit card information will NOT be transferred. After entering the credit card information, please print, sign your name and fax to: +886-3-5339315. Please print the page for your records. Upon receipt of this payment, an official confirmation will be issued.**

Telegraphic Transfer (*All bank transfer charges are to be paid by registrants)

Please wire the total amount of registration fee directly to the bank account below:

Bank Name: BANK SINOPAC HSINCHU BRANCH

Account No: 018-001-0001622-1

Swift Code: SINOTWTP018

Beneficiary: The Great Idea Public Relations