3rd Italian Workshop on Eclipse Technologies
Eclipse – IT 2008

November 17-18, 2008
Università di Bari
Dipartimento di Informatica
Bari, Italy

EARLY REGISTRATION FORM

DEADLINE: OCTOBER 30 2008
to be completed in block letters and sent to

Centro Italiano Congressi  CIC Sud
Viale Escrivà, 28 – 70124 Bari (Italy)
Fax +39 080/5043736 email: info@cicsud.it

Last name………………………………………First name …………………………….................................
Company/Institution…………………………………………………………………………………………………………..
Address……………………………………………………………………………………………………………………………….
City........................................................Postal/Zip code............................................................
Phone........................................................Fax............................................................
email.........................................................................................................................

INVOICE TO (obligatory fields):

COMPANY/INSTITUTION NAME AND ADDRESS………………………………………………………………………………
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SOCIAL SECURITY and VAT NUMBERS…………………………………………………………………………………………
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Registration fee (VAT INCLUDED)

- Registration by October, 30  €  90.00

The Registration for participants fee includes: attendance at workshop sessions and social functions, full conference kit and certificate of attendance.

Method of payment

Fee should be paid to the Organizing Secretariat by:

- **Credit Card**
  
  Please charge the total amount of ............... to the following credit card:
  
  - VISA
  - MasterCard

  Your signature indicates your agreement to pay the fees with the credit card number provided below.

  Name (as it appears on card): ____________________________________________

  Card Number: ____________ - ____________ - ____________ - ____________

  Expiration Date: Month _________ / Year: _________

  Cardholder's signature: ___________________________________________

- **Non-transferable bank cheque** made payable and sent to Centro Italiano Congressi CIC SUD

  no. .............................................. BANK..................................................

- **Bank transfer** to Centro Italiano Congressi CIC Sud

  Banca Intesa Bari Branch no. 3 - IBAN IT51 R030 6904 0490 5947 2810 153
  SWIFT CODE: BCITIT 33200
  (please make reference to “ECLIPSE 2008” and enclose a copy of your bank transfer)
  PAYMENT HAS TO BE MADE WITH THE INSTRUCTIONS “WITHOUT CHARGES TO THE BENEFICIARY”

Signature..................................................  Date...........................................................