

Registration Form

Please fill all the details in running order (Example: Running Order). Please do not leave any applicable field blank

Mr. Ms.

First Name: _____ Surname: _____
 Designation: _____ E-mail: _____
 Organisation/ College: _____
 Address: _____
 Address: _____
 City – Pin code: _____ Student: (Y/N) _____
 Direct Tel: _____ Mobile: _____
 ACM/ ACM Bangalore Member (If yes membership number): _____

Registration Fee Details:

	COMPUTE 2008 Full Event**		Per Tutorial***		HEADSTART 2008
	Early Bird	On Spot	Early Bird	On spot	
ACM Bangalore/ ACM members	5000	6000	1000	2000	Early Bird: INR 1000 (3 days) On Spot: INR 1250 (3 days)
Non Members	6000	8000	2000	3000	
Students (with valid ID card)	2000	3000	500	750	Students: Early Bird : INR 500 (per day) On Spot : INR 600 (per day)
Registration, FIVE OR MORE 10%group discount					

TOTAL Registration Fee Applicable: INR _____

**Includes paper sessions, keynotes, doctoral symposium and max of 3 tutorials with exact tutorials to be indicated
 Please indicate tutorial numbers: _____

*** Registration on a day basis, exact tutorials to be indicated . Indicate tutorial numbers: _____

You have to make the payment before/ along with the registration form.

Cancellation Policy: Cancellations must be confirmed in writing. Substitutions are welcome till a day prior to the event. No refund later than a week before the meeting. Registered participants who fail to attend and do not cancel will be invoiced for 100%of the registration fee.

How to register

FORM: Send the filled up form to: ACM Bangalore, Golden Square Business centre, 102, Eden park, 20, Vittal Mallya Road, Bangalore 560001. Phone(080- 22996505) or Fax to (080) 22243863 (For Group Bookings send all the forms together)

Payment: DD:
 DD should be made in favour of ACM Bangalore Chapter, payable at Bangalore and send along with this filled up form (faxed) to the following address: ACM Bangalore, Golden Square Business centre, 102, Eden park, 20, Vittal Mallya Road, Bangalore 560001. Phone(080- 22996505)

Additionally please write the DD details below:

DD Details: DD no.: _____ Issuing Bank: _____ Branch: _____

Date of issue: _____

Payment: Online Transfer: Transfer the amount to the ICICI Bank, M.G. Road branch, A/ c 000201090184, and include your Name+ Compute/ Headstart + Phone Number as a note. Also indicate the payment details/ transaction id below in the form before faxing. Also send a note to acmblr.treasurer@gmail.com, with your transaction id, date and amount, with the subject: Compute/ Headstart Registration

Date:

Signature.....