

## WIRE TRANSFER REGISTRATION

### Wire transfers can be made to:

Bank: ING Belgium  
Address: Opgeestienlaan 401, 9000 GENT, Belgium  
Swift Code: BBRUBEBB  
IBAN Account Number: BE13 3630 2606 3839  
Account Name: ICST IVZW

### Please ask your bank to include the following on the transfer:

- 1) Registrant's full name
- 2) Acronym of conference

Please add EUR 15.00 to cover bank service charges.

**After the transfer has been completed, please fill out the registration form below and send it with your payment transfer confirmation from the bank to [registration@icst.org](mailto:registration@icst.org). Once we receive your payment confirmation you will be enabled to upload your paper.**

## REGISTRATION POLICY

- **For each accepted paper, at least one author must register at a non-student rate, even if all authors are students.** Completed registration is required for all accepted papers and/or presentations that are to be included in conference proceedings. One registration covers two papers of those authors who have multiple papers accepted.
- Payments are processed in EUR.
- Cancellation/Refund: There is a EUR 25.00 service charge for processing a refund. Refund requests must be sent by email to [registration@icst.org](mailto:registration@icst.org) no later than 5 business days prior to the conference. Refunds are processed in the same manner as payments.
- Payment invoice is available at the conference registration desk.
- Registration fee includes:
  - participation in the registered program
  - badge
  - conference bag and/or gadget
  - conference document (proceedings on CD-ROM)
  - social event (only included in the full technical session fee)
  - coffee breaks and lunches
  - VAT of the conference location country (VAT is reclaimable from your local tax authorities if you have a valid VAT number in any of the EU member states. For more information please visit the website of the [European Commission](http://ec.europa.eu))

This is a generic Registration Form. For information specific to the conference that you are registering for, please visit the conference website, which can be accessed through [www.icst.org](http://www.icst.org).

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## REGISTRATION FORM

*Please click on the gray boxes below to fill in the form.*

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### Registrant Contact Information

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- |                 |  |                     |
|-----------------|--|---------------------|
| * Prefix        |  |                     |
| * First Name    |  | * Last Name         |
| Title           |  | Company/Affiliation |
| * Address       |  |                     |
| * City          |  | * State             |
| * Country       |  | * Zip Code          |
| * Phone         |  | Fax                 |
| * Email address |  |                     |

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### Registration information

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- \* Acronym of Conference:
- \* Events you are registering for:
- \* Special needs or extra proceedings / over-length pages:
- \* Date of wire transfer:
- \* Wire transferred amount:
- \* Wire transfer made from (bank name):
- \* Any other information regarding the wire transfer:

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### Registrant Status

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Check this box if you are a member of ICST, Create-Net, IEEE and transferred the Member Fee.  
Please enter your membership ID:

Check this box if you are a Full-time Student and transferred the Student Fee.  
Name of university:  
Student ID:

If you are a registering at the student rate and are also an author, please indicate which of your co-authors are registering at the full rate?

Check this box if you are presenting a paper.  
What is the ID and title of the paper you are presenting?

Check this box if you require a Letter of Invitation for visa application.

Please let us know if you have any dietary or other special needs: