



ICLP'04

**20th International Conference
on Logic Programming
September 6-10, 2004
Saint-Malo, FRANCE**

Registration form

Please fill in this following form and return it with payment to:

Edith Blin-Guyot
Bureau des colloques
INRIA Rennes
Campus de Beaulieu
35042 Rennes Cedex - FRANCE
Fax : +33 2 99 84 71 71

1- IDENTITY

Title: ☐ Ms ☐ Mrs ☐ M. ☐ * Dr ☐ * Prof.

First name*: _____ Last name*: _____

Affiliation* _____

Address: _____

Zip code: _____ City: _____ Country*: _____

Phone: _____ Fax: _____ E-mail: _____

*: will appear on the badge

2- REGISTRATION (VAT 19,6 % included)

Fees per person

	Academic/Industry	Student Student card copy required
Early rate - Before July 12, 2004	<input type="checkbox"/> 460 €*	<input type="checkbox"/> 310 €**
Late – From July 12, 2004	<input type="checkbox"/> 560 €*	
One day rate	<input type="checkbox"/> 150 €***	

*: access to all the conference sessions, welcome cocktail, lunches, coffee breaks, ICLP proceedings, one of the workshops proceedings, banquet and Mont Saint-Michel guided tour included

**: access to all the conference sessions, welcome cocktail, lunches, coffee breaks, ICLP proceedings, one of the workshops proceedings included (banquet and Mont Saint-Michel guided tour are not included) – *Please provide us a copy of your student card with the registration form*

***: access to all the conference sessions of the day, lunch, coffee breaks, one of the workshops proceedings

Please tick the chosen workshop proceedings:

☐ Teach LP ☐ Multi CLP/WLPE ☐ CICLOPS ☐ PPSWR ☐ COLOPS

Options : fees per person

Extra ICLP 2004 proceedings	<input type="checkbox"/> 35 € x ... = €
Extra workshop proceedings <input type="checkbox"/> Teach LP x copy (ies) <input type="checkbox"/> Multi CLP/WLPE x copy (ies) <input type="checkbox"/> CICLOPS x copy (ies) <input type="checkbox"/> PPSWR x copy (ies) <input type="checkbox"/> COLOPS x copy (ies)	<input type="checkbox"/> 15 € x ... = €
Extra banquet	<input type="checkbox"/> 50 € x ... = €
Extra Mont Saint-Michel guided tour	<input type="checkbox"/> 20 € x ... = €

3 – PAYMENT INFORMATION

☐ Credit card

Cardholder name and first name: _____ hereby authorizes INRIA to charge my credit card:

☐ Visa ☐ Mastercard ☐ Eurocard (*American Express and Diner's Club cards are not accepted*)

Credit card number: | | | | / | | | | / | | | | / | | | |

Expiration date (month/year): _____ / _____

Total payment: _____

Cardholder signature

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☐ **By bank transfer to Trésorerie Générale des Yvelines.** Address: 16 avenue de Saint-Cloud, 78018 Versailles Cedex, France
(Count number: 10071 - 78000 - 00003003958 80 - Swift code: FR 76 1007 1780 0000 0030 0395 880 – BIC: BDF EFR PP
XXX). Please do not forget to state your name and the conference reference: **ICLP 2004/INRIA**

☐ **By cheque** wording in Euros drawn out of a French Bank, written out to ICLP 2004. Cheque must be enclosed with the registration form and made payable to the "Agent comptable de l'INRIA"

☐ **By purchase order (for French delegates only).** Purchase orders must be enclosed with the registration form. Please do not forget to state your name and the Conference reference: ICLP 2004

4 – CANCELLATION

Refund policy: cancellation must be requested **before July 31st**. 100 € as cancellation / administrative fees ill be retained. No refunds after July 31st.

6 - TRANSPORT between Saint-Malo station and ICLP 2004 special shuttle

Special shuttle ICLP 2004 : I wish to use the free shuttle between Saint-Malo station and ICLP 2004 Conference Center (Palais du Grand Large)

➔ Arrival on Sunday September 5, 2004:

☐ from Saint-Malo station : 18:40 to the Conference center (Palais du Grand Large) 18:45

☐ from Saint-Malo station: 20 h 15 to the Conference center (Palais du Grand Large) 20:20

➔ Departure on Friday September 10:

☐ from the Conference center (Palais du Grand Large): 12 :30 to the Saint-Malo station

➔ I will arrive by my own means of transport - Day of arrival: _____ Approximative time: _____

➔ I will leave by my own means of transport - Day of departure: _____ Approximative time: _____

7 - CATERING In order to help the Conference organisation, please tick the appropriate boxes below:

I will attend the welcome cocktail on Sunday, Sept. 5 ☐

I will attend the lunches on : Monday, Sept. 6 ☐ Tuesday, Sept. 7 ☐ Wednesday, Sept. 8 ☐ Thursday, Sept. 9 ☐

I will attend the banquet on Tuesday, Sept. 7 ☐

Please indicate below dietary restrictions or any specific requests :

8 – SOCIAL PROGRAM

☐ I will attend the Mont Saint-Michel guided tour on Wednesday, Sept. 8