

**IEEE International Conference on Service Operations
and Logistics and Informatics (SOLI 2017)
Bari, Italy - September 18-20, 2017**

REGISTRATION FORM

to be completed in block letters and sent to Centro Italiano Congressi CIC Sud srl
Viale Escriv , 28 – 70124 Bari Fax +39 080/5043736 email: info@cicsud.it

Last name _____ First name _____

Company _____

Address _____

City _____ Postal/Zip code _____

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@mail _____

INVOICE TO (obligatory fields):

COMPANY/INSTITUTION NAME AND ADDRESS.....

SOCIAL SECURITY and VAT NUMBERS.....

Registration fees (22% VAT INCLUDED – fees are in €)

Conference and Workshop	Advance Registration (Before July 15, 2017)	Late Registration (After July 15, 2017)
IEEE Member	€ 400	€ 500
Non-IEEE Member	€ 500	€ 600
IEEE Student Member	€ 150	€ 250
Non-IEEE Student Member	€ 200	€ 300
IEEE Life Member	€ 200	€ 300
Full one- day registration for the workshop (not for authors)	-	€ 100
Student one- day registration for the workshop (not for authors)		€ 50

Additional paper (only one additional paper is allowed for each registration): € 150, Conference banquet: € 80 per person

IEEE Member and Regular Registration includes:

- Conference Proceedings containing the **SOLI 2017** conference papers;
- One reception kit, the Conference Banquet, morning and afternoon coffee breaks;
- Access to all planned conference sessions and workshop.

IEEE and Non IEEE student registration includes:

- Conference Proceedings containing the **SOLI 2017** conference papers;
- One reception kit, morning and afternoon coffee breaks;
- Access to all planned conference sessions and workshop.

The One-day registration (September 19) includes:

- Access to all planned conference sessions and workshop
- Morning and afternoon coffee breaks

Please indicate us if you have any special dietary requirements

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: _____

Bank transfer to Centro Italiano Congressi CIC Sud **Banco di Napoli – Sede di Bari**
IBAN: IT27S0101004015100000018667 SWIFT CODE: IBSPITNA
(please make reference to "**SOLI 2017**" and enclose a copy of your bank transfer)

PAYMENT HAS TO BE MADE WITH THE INSTRUCTIONS "WITHOUT CHARGES TO THE BENEFICIARY"

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

Pursuant to the Italian Act on privacy no. 196 of June, 30, 2003, I hereby authorize to use my personal data contained herein.