

Registration Form for Foreign Participants¹

(Please note that the deadline for the registration is September 20, 2006)

Title, First Name, Family Name:

Gender (M/F):

Affiliation:

.....

Street:

City:Country:

Postcode: Phone/Fax:

E-mail:

Name of Accompanying Person(s):

Meals (please indicate the number of persons): Vegetarian: Regular:

Please check those you wish to attend:

- ☐ Computer Science Logic 2006 (CSL'06), September 25–29, 2006.
- ☐ Logic and Combinatorics, Satellite Workshop of CSL'06, September 23–24, 2006.
- ☐ Algebraic Theory of Automata and Logic, Satellite Workshop of CSL'06, September 30 and October 1, 2006. This workshop is sponsored by the AutoMathA project of the European Science Foundation (ESF).

REGISTRATION RATES (for CSL'06)

	Early registration through August 14, 2006	Registration from August 15, 2006	On-site
Regular	350 EUR	400 EUR	106 000 HUF
Student ²	250 EUR	280 EUR	74 000 HUF
Accompanying person	100 EUR	120 EUR	32 000 HUF

REGISTRATION RATES (for each workshop)

	Early registration through August 14, 2006	Registration from August 15, 2006	On-site
Including workshop dinner	80 EUR	95 EUR	25 000 HUF
Excluding workshop dinner	50 EUR	60 EUR	16 000 HUF
Workshop dinner for accompanying persons	30 EUR	30 EUR	8 000 HUF

¹Please fax to: CSL'06, Department of Computer Science, University of Szeged, +36-62-546-397 or +36-62-544-895.²In order to be eligible for the students registration rate, please fax a copy of your student ID together with the registration form.

Registration fees:

CSL'06 registration:	_____	Accompanying person:	_____
Logic and Combinatorics Workshop:	_____	Workshop dinner for accompanying person:	_____
Algebraic Theory of Automata and Logic Workshop:	_____	Workshop dinner for accompanying person:	_____

Total fee to be paid: _____

(Please note that those coming from ESF member countries and wishing to attend the Algebraic Theory of Automata and Logic Workshop may apply for free registration for this workshop. The deadline for submitting the application is July 20, 2006.)

Method of payment (check the applicable):

☐ **Bank Transfer**

Bank: MKB Rt.

Address of Bank: 6720 Szeged, Kölcsey u. 8, Hungary

Name of account holder: SZTE Szeged

Address of account holder: 6720 Szeged, Dugonics tér 13, Hungary

Account No. (IBAN): HU 84 10300002 66103184 27024884

SWIFT Code: MKKB HU HB

With notice: CSL'06, name of participant

Please **make sure** that the bank transfer is made in EUR, and net of all bank charges and commissions. **Include a copy of the bank draft** unless you need an invoice. If you need an invoice, please send us the registration form **before** transferring the registration fee and send us a copy of the bank draft together with the registration form only after the invoice is received and the bank transfer is made. Please note that all participants will be provided with a receipt of the registration fee at the conference.

☐ **I need an invoice**

The invoice should be made out to:

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Address the invoice should be sent to:

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In order to be eligible for the early registration rate, the registration fee must be transferred by August 14, 2006 and a copy of the bank draft should be sent together with the registration form.

☐ **On-site in cash (Hungarian Forint only)**

Signature:Date: