

**ATTENDEE/AUTHOR CONFERENCE REGISTRATION FORM**  
**International Conference on**  
**Information Technology, Democracy and**  
**Economic Development**  
**(ITDED)**

July 11, 2011  
University of Cambridge, Cambridge, United Kingdom

**Please print this form, fill in the required information, and return it (by fax or mail) together with your full payment to:**

IASTED Secretariat  
Building B6, Suite #101, 2509 Dieppe Ave SW, Calgary, Alberta, Canada T3E 7J9  
Tel: (403) 288-1195, Fax: (403) 247-6851  
E-mail: [ITDED@iasted.org](mailto:ITDED@iasted.org) Web Site: <http://www.iasted.org>

Title: <input type="checkbox"/> Prof <input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please indicate)	
First Name:	
Last Name (Family name):	
University/Company:	
Address:	Tel:
City:	Fax:
Province/State:	Email:
Postal/Zip Code:	
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Prices are in **US Dollars**. Payments must be made in **US Dollars**

**Registration Fee**

- |  |          |
|--|----------|
| <input type="checkbox"/> One Day Attendee:                       | \$150.00 |
| <input type="checkbox"/> Additional (one) CD Proceedings:        | \$60     |
| <input type="checkbox"/> Additional (one) Dinner Banquet Ticket: | \$75     |
| <input type="checkbox"/> Membership (1 year):                    | \$110    |

TOTAL USD \_\_\_\_\_

**Method of Payment**

**Cheque:** Made payable to **IASTED**. Cheques must be in **US dollars drawn on US banks**, or must be an **International Money Order/Bank Draft in US funds**. Please fax a copy of the cheque with your registration form, and mail cheques to IASTED (Building B6, Suite #101, 2509 Dieppe Avenue SW, Calgary, AB, T3E 7J9)

**Credit: VISA or MasterCard:**

Card #
Expiry date:
Cardholder's Name:
Cardholder's Signature:
Date:

**Bank Transfer:** Made payable to **IASTED**.

Name of Account: <b>IASTED</b>
Account #: <b>25009-001 4600-029</b>
Swift Transfer Code: <b>BOFMCAM2</b>
Bank of Montreal, Market Mall Branch
3625 Shaganappi Trail NW, Calgary AB, Canada, T3A 0E2

In order for your payments to be processed, you **MUST** include the following information on your bank transfer documents:

- Name
- IASTED ITDED 2011