REGISTRATION FORM

803/

Please type or print

SWAT ´98

6th Scandinavian Workshop of Algorithm Theory

Stockholm, Sweden
July 8-10, 1998

Family name: ______________________________

First name: ______________________________ ❑ Mr ❑ Ms ❑ Dr ❑ Professor

University / Institution / Affiliation: ______________________________

Department: ______________________________

Mailing address: ______________________________

______________________________ Country: ______________________________

Telephone: ______________________________ Fax: ______________________________
(country code - area code - number) (country code - area code - number)

E-mail: ______________________________

ADVANCE REGISTRATION		**Price/person in SEK paid before / after June 1**	**Total SEK**	(Code)
Conference fee excl. V.A.T.	Participant	2,000 / 2,400	________	(001/002)
(see programme)	[1] Student	1,400 / 1,800	________	(005/006)
Conference fee incl. V.A.T.	Participant	2,500 / 3,000	________	(011/012)
(see programme)	[1] Student	1,750 / 2,250	________	(015/016)
Social programme	Sightseeing tour, July 7	195	________	(700)
Hotel deposit	Park, Brunnen	1,100	________	
Per room	Arcadia	600	________	
		Total SEK	________	
			=====	

Any VAT increment will be specified in the confirmation letter. SCB's VAT reg. No. is SE556127722801.
[1] Students should supply proof of their status.

Special requests (e.g. dietary requirements) ______________________________ (500)

ACCOMMODATION	**Hotels**	**Single room**	**Double room**
Arrival: _____/_____	Park	❑ 1,090	❑ 1,090
Departure: _____/_____	Brunnen	❑ 695	❑ 895
	Arcadia	❑ 510	❑ 610

Rates are in SEK and valid per room and night, inclusive of breakfast, service and a V.A.T. increment of 12%

Sharing double room with: ______________________________

PAYMENT

Payment should be made in SEK, payable to Stockholm Convention Bureau.
Please indicate "SWAT '98" and your name on all money transfers.

❑ Banker's Draft (Personal or Company cheques cannot be accepted)
❑ Bank Account, S-E-Banken, Stockholm No. 5267-10 066 16, SWIFT-address ESSESESS
❑ Postal Giro 65 37 38-5 ❑ Bankgiro 644-8773
❑ Eurocard/Mastercard ❑ Diners Club ❑ American Express ❑ Visa

Charge my card No.: ______________________________

valid through: ______________ Total SEK: ______________________________

Date ______________________ Signature ______________________________

Return this form to: Stockholm Convention Bureau, "SWAT '98", P O Box 6911, SE-102 39 Stockholm, Sweden (Fax+46 8 34 84 41)