

**ICIAP 2001**  
**11<sup>th</sup> International Conference**  
**on Image Analysis and Processing**  
 September 26/28, 2001

**REGISTRATION AND HOTEL RESERVATION FORM**

to be sent to *Eurocongressi s.r.l.* - via Libertà, 78 - 90143 Palermo-Italy  
 ph. 39+091+302655 - fax 39+091+341533 – e-mail [eurocongressi@mbox.infcom.it](mailto:eurocongressi@mbox.infcom.it)

Surname.....

Name.....

Affiliation.....

Address.....

Zip Code..... Town.....Country.....

Phone.....Fax..... E mail .....

***I enclose payment for:***

- Registration n.....Regular(s) EUR.....
- Registration n. .... IAPR/AI \*IA member(s) EUR.....
- Registration n. ....Full-time Student(s) EUR.....
- N.....additional social dinner EUR.....
- N.....additional proceedings EUR.....

**Total EUR .....**

**Payments for registration fee**

Bank draft in favour of *Comitato Organizzatore ICIAP* on account n. **410295574** (CAB 04685  
 ABI 01020 ) c/o Banco di Sicilia- agency n. 67 - Via Libertà n° 185 Palermo, Italy  
 (please enclose copy to Eurocongressi)

Credit card       American Express       VISA

n.....expiry date.....

Date.....

Signature

.....

# HOTEL RESERVATION

*Please reserve:*

Hotel.....

n° \_\_ single room(s) from..... till ..... n° ..... nights

n° \_\_ double room(s) from..... till ..... n° ..... nights

I would like to share the room with .....

*Deposit of one night is requested upon reservation. Otherwise, if you have Visa or American Express cards, let us have number and expiry date just to guarantee reservation.*

***Reservations without deposit of one night or credit card information cannot be considered.***

• <b><i>Payment for hotel reservation (one night)</i></b>	EUR.....
booking fee	EUR. ....10.....
	-----
<b>Total</b>	<b>EUR. ....</b>

• **Credit card information**

•

American Express

Visa

n.....expiry date.....

- Bank draft in favour of *Eurocongressi srl c/o Banco di Sicilia- agency n. 67 - Via Libertà n° 185 Palermo, Italy CAB 04685 ABI 01020 – account number 410210500*  
(please enclose copy to Eurocongressi)

**Payments for hotel reservation include the first night that it is not refundable after August 31.**

Date .....

Signature

.....