CTW 2002 Registration Form

Please print out and then fill out this form. Please print or type clearly. Only one registrant per registration form.

(1) Personal Information

Name _____ _____ _____ Dr. Mr. Ms.
Last (Family) First (Given) Middle Initial

Name for Badge (if different) _____

Company / Organization Name _____

Title _____

Mailing Address _____ _____ _____ _____
Street / PO Box City State/Province Postal / Zip

E-mail Address _____

Phone Number _____ Fax Number _____

(2) Registration Fee (US Dollars)

	On or Before April 1, 2002	After April 1, 2002	
Registration Fee	**$ 600**	**$675**	**$ _____**
Spouse Fee	**$ 200**	**$ 260**	**$ _____**
		Total Amount	**$ _____**

(3) Fee Payment (Only by Check or Credit Card)

Payment by Check (payable to **IEEE 2002 Communication Theory Workshop** or **IEEE CTW'02** in US dollars)

Payment by Credit Card

VISA MasterCard

Card Number |___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Expiration Date _____/_____(Mo/Yr), Cardholder Name (print)_____

Cardholder Signature _____ Date _____

Registration will be completed only upon receipt of payment.

Please return this form:

By fax to
(+1) 404-894-7883

or

mail to

Prof. Ye (Geoffrey) Li
School of Electrical and Computer Engineering
Georgia Institute of Technology
777 Atlantic Drive
Atlanta, GA 30332-0250