

ISOPE-2007 Lisbon: Invoice and Advance Conference Registration Form
17th (2007) International Offshore and Polar Engineering Conference
July 1–6, 2007, Corinthia Lisboa Hotel, Lisbon, Portugal

Please Type Or Print Clearly

NAME _____ (Circle) Male Female
 Surname (Family) Forename (First) Middle I.
 TITLE (Circle) Prof. Dr. Mr. Mrs. Ms. Spouse's Name (if attending) _____
 MAILING ADDRESS (full address including company name) _____ Need banquet ticket for spouse? _____
 Company _____ Dept _____
 Street _____ City _____ State (province) _____ Zip(postal) _____
 Country _____ Office Phone _____ Fax _____ E-mail _____

Paper Number (if author or co-author): 2007- _____ - _____

Sponsor and Cooperating Societies (circle one): ISOPE ASCE (USA) CAPP (Canada) CSCE (Canada) CSOE (China) CSNAME (China) CSTAM (China) DKMM (Germany) GMT (Germany) IE (Australia) IRO (The Netherlands) JSMS (Japan) KSOE (Korea) KSCE (Korea) JASNAOE (Japan) NPF (Norway) OES (U.K.) PII (Indonesia) RAS (Russia) SOBENA (Brazil) SPRI (UK) SSSS (Singapore) TCG (Greece) EIT (Thailand) TOC (Turkey) TSOE USME (Ukraine) VTT (Finland)

I pay at ISOPE member rate: Membership number _____ I pay at cooperating society member rate: Membership number _____

ADVANCE REGISTRATION FEES

Please check boxes as appropriate and fill in the amount to be paid. All persons attending the conference are required to register and pay the appropriate fee. **After May 31, add a surcharge of \$80.**

Category	Advance Registration Fee (US\$)*	
See DEADLINES	2+days	1 day
<input type="checkbox"/> ISOPE Members	600	500
<input type="checkbox"/> Author, Co-author, Chair, Co-Chair (non-ISOPE members)	640	540
<input type="checkbox"/> Member of Coop. organizations	640	540
<input type="checkbox"/> Non-member	670	570
<input type="checkbox"/> New ISOPE member application (incl. 2008 membership fee and one year journal issues)	690	590
<input type="checkbox"/> ISOPE Membership fee, 2007	90	90
<input type="checkbox"/> ISOPE Member Full-time Student: 2007 ID	380	380
<input type="checkbox"/> Nonmember Full-time Student with 2007 ID	410	410
<input type="checkbox"/> New student member application (incl. 2008 membership fee and one year journal issues)	430	430
<input type="checkbox"/> Lunch tickets for 4 days, including tax	135	135
<input type="checkbox"/> Additional /Separate Banquet Ticket	85	85
<input type="checkbox"/> 1-day registrant must circle one: Monday Tuesday Wednesday Thursday		
<input type="checkbox"/> For direct air mailing of CD-ROM of 4-volume ISOPE-2007 conference proceedings to your address, add: USA \$5 Canada \$5 Other countries \$10		

Conference Tour and Spouse Program: Find details in this program
 If register **after May 31**, add \$80
 For tour update, see Update on www.isope.org

TOTAL AMOUNT DUE US\$ _____

The **full** Conference registration fee (2 days or more) **includes** the conference reception, a conference banquet, tea breaks, and a CD-Rom of the 3,700-pp. (est.) **4-volume** conference proceedings.

* The **1-day** registration fee **includes** CD-Rom of the **4-volume** conference proceedings, tea breaks.

DEADLINES FOR ADVANCE CONFERENCE REGISTRATION

1) March 24, 2007 for the presenting author (or co-author) per paper: No cancellation refund granted.

2) May 31, 2007 for others. Completed Advance Registration Forms with correct amount of payment (or remittance) in US Dollars will be processed until **May 31, 2007**, and paid participants will receive confirmation. Forms received after **May 31** are subject to a surcharge of US\$80. **Registrants will not be individually invoiced.**

CANCELLATIONS - Request in writing for cancellation of registration received by **June 4, 2007** only will be granted a refund minus US\$70 handling fee except an author per paper published in the proceedings.

METHODS OF PAYMENT: Make checks or international money orders (payable to ISOPE). Payments must accompany this Advance Registration Form.

I am paying by credit card (only **MasterCard, Visa** or **Amex** is accepted). *The card number should be typed in bold face or written clearly to be readable in the transmitted fax copy.*

Card No. _____ Security code _____

Name on Card _____ Exp. Date _____

Signature _____ Date _____, 2007

Enclosed is an international money order or a check drawn on a bank in the USA for the amount of US\$ _____. A check drawn on a bank outside the USA will not be accepted.

Fax this registration form with correct amount of payment to:
If you faxed this form, no need to airmail.

ISOPE, 495 North Whisman Road, Suite 300
Mountain View, California 94043-5711, USA
FAX 1-650-254-2038 ISOPE Federal ID #84-1144712

Copy or download from www.isope.org. Complete and send this form with correct amount to reach ISOPE by applicable deadlines.