



MEETING REGISTRATION FORM

INFORMS 10th

Telecommunications Conference

May 5- 7, 2010

PLEASE WRITE CLEARLY

Last Name _____ First Name _____ Middle _____

Affiliation _____ Title _____

Address _____

City _____ State _____ Zip _____ Province _____ Country _____

Telephone _____ Fax _____ Email _____

Conference Registration

Telecommunications Section Member \$ 400

Nonmember (Includes membership in section) \$ 450

Student (Full-time students must attach a faculty certification to attend.
Email certification to meetings@informatics.org or fax to 443-757-3515) \$ 200

TOTAL ENCLOSED \$ _____

Payment

Check Enclosed AMEX MasterCard VISA Discover

Card Number _____ Expiration _____ Signature _____

Make check payable to: INFORMS Telecommunications, 7240 Parkway Drive, Suite 300, Hanover MD 21076 USA. Call 800-446 3676 or 410-443-757-3591, FAX 443-757-3515, email meeting@informatics.org, Cancellation: Must be in writing and postmarked no later than May 1, 2010 for refund.

Do you have any special requirements when attending this meeting? Please describe: _____