

**Registration Form
Exhibition Space ICDM'2009**

Fax to Conference Center:

IBaI
z.H. Frau Schatte
Koernerstrasse 10
04107 Leipzig
FAX: +49 341 86 12 275

Please fill out the form completely and print it afterwards. Do not forget to sign it before you send it.

Name: Company: Address:
Telephone Number: E-mail Address: Hereby, I like to register exhibition space on the **ICDM'2009**,Fee: € (actual fees can be found on the [ICDM website](#))

(fee includes table with power source, 2 square meter exhibition space)

Bank transfer
made? Yes-----
Date-----
Signature