



REGISTRATION FORM

7th Nordic Workshop on Secure IT Systems

November 7 - 8, 2002

First name: _____

City: _____

Family name: _____

Country: _____

Organisation: _____

Phone: _____

Address: _____

E-mail: _____

Post/Zip code: _____

Fax: _____

Fees

The conference fee including participation in the workshop, documentation, lunch, conference dinner, coffee and soft drinks is 2600 SEK (for fulltime students 1900 SEK) excl. VAT per person if you register **on or before October 1**. For registrations after October 1, the fee is 2900 SEK (for fulltime students 2200 SEK) excl. VAT. Payment should be made by Visa or Master Card.

Card type: Visa Master Card

Number: _____

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Valid until: _____

Name of cardholder: _____

Amount in SEK: _____

Signature of cardholder: _____

The fee will be fully refunded in case of cancellation of your registration at least four weeks before the conference, and 50% refunded with two weeks notice.

VAT number (European Union members only): _____

Special dietary requirements: _____

Yes, I would like to participate in the conference dinner on November 7.

Hotel Reservation

The official conference hotel is the First Hotel Plaza, Västra Torggatan 2, Karlstad, phone +46 54 10 02 00, www.plaza-karlstad.nu. The hotel offers the following reduced rates. The rates include breakfast and VAT:

Single room 774 SEK per night

Double room 1025 SEK per night

Double room together with: _____

Accounts are to be settled directly with the hotel, which honours all major credit cards.

Date of arrival: _____

Date of departure: _____

Special requests: _____

**The registration form should be sent by postal mail or fax
We will send you a confirmation by email. Our VAT No.: SE-202100312001.**

Address: Karlstad University
Conference Administration
SE-651 88 Karlstad, Sweden

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Fax: +46 54 700 2047
E-mail: conference@kau.se