

AISTATS 2012 REGISTRATION

Payment to:

Max-Planck-Institut für Intelligente Systeme, Heisenbergstr. 3, 70569
Stuttgart, Germany

FAX: 0049 711 689 1222

Attn.: AISTATS 2012

I. PERSONAL INFORMATION

REGISTRANT: _____ TITLE: _____

AFFILIATION: _____

EMAIL: _____

II. PAYMENT INFORMATION

Credit Card Company: VISA Master Card American Express

CREDIT CARD NO: ____ / ____ / ____ / ____

CHECK NO: (last 3 or 4 digit no. in the signing field of your card) _____

Card Holder's name (please print): _____

Expiration Date: (mm/yyyy): ____ / ____

Amount: ____ , ____ Euro (in words: _____)

Payment: ONE TIME ONLY

DATE (dd/mm/yyyy): _____

Card Holders Signature