

# REGISTRATION FORM

## AES 23<sup>rd</sup> International Conference

### Signal Processing in Audio Recording and Reproduction

Hotel Marienlyst, Helsingør, Copenhagen, Denmark  
May 23–25, 2003

Mail or fax this form with payment information to  
 AES 23rd International Conference, Treasurer, S. K. Pramanik  
 Sarpsborgvej 56, 7600 Struer, Denmark, Fax +45 97853105  
 or register on line at [www.aes.org/events/23/registration](http://www.aes.org/events/23/registration)  
 Rooms for demonstrations are available to delegates for a moderate fee. Please apply to the secretary,  
 Knud Bank Christensen, Email: [23rd\\_info@aes.org](mailto:23rd_info@aes.org), Tel: +45 8742 7146, Fax: +45 8742 7010.  
 Sponsorships for the conference are invited. Please apply to the secretary.

**1** Please print/type all information as you wish it to appear on your badge.

Family Name \_\_\_\_\_ First Name \_\_\_\_\_

Company/organization \_\_\_\_\_ Job Title \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Post Code \_\_\_\_\_ Country \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

AES Membership No. \_\_\_\_\_ Name of Accompanying person \_\_\_\_\_

**2 Conference Registration.** Please check appropriate box (all figures in Danish Kroner DKK)

<input type="checkbox"/> <b>AES MEMBERS</b>	<input type="checkbox"/> 6500 (before April 23)	<input type="checkbox"/> 7000 (after April 23)
<input type="checkbox"/> <b>NONMEMBERS</b>	<input type="checkbox"/> 7200 (before April 23)	<input type="checkbox"/> 7700 (after April 23)
<input type="checkbox"/> <b>AUTHORS</b>	<input type="checkbox"/> 4200	
<input type="checkbox"/> <b>AES STUDENT MEMBERS</b>	<input type="checkbox"/> 4200	
<b>ACCOMPANYING PERSON</b>	<input type="checkbox"/> 500 May 23–25 including breakfast only	
	<input type="checkbox"/> 1400 May 23–25 including breakfast, dinner, and banquet	

Arrival date  Departure date

**Extra Nights:**  1100 single room, per night including breakfast  
 1400 double room, per night including breakfast

**3 Payment Modes** (check box) Total Amount DKK \_\_\_\_\_

Giro / Bank Transfer to BG Bank, account No. 1199 7412282. Account holder - AES Denmark  
 on Date : \_\_\_\_\_

Please charge my credit card in US\$:

Amex  Mastercard/Eurocard  Visa

Card Number  Expiration Date  /

Month Year

Name on card (print) \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Cardholder \_\_\_\_\_