

**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