

Registrant(s) Information *(Please print clearly)*

***ARE REQUIRED FIELDS & MUST BE COMPLETED**

*Last/Family/Surname		*First/Given Name	Middle Name
*Company, University or Other Affiliation			
*Mailing Address			P.O. Box / Mail Stop
*City	State/Province	*Postal/Zip Code	*Country
*Primary Contact Number		*Fax Number	*Email Address (for confirmation purposes)

Emergency Contact	Emergency Contact Number	IEEE Membership Number
Do you have any special needs? <i>(circle all applicable)</i> : Wheelchair Access Audio Visual Vegetarian Other: _____		

Full Conference Registration Includes: Proceedings, Social Functions (Breaks and Banquet), tutorials and workshops
One-Day (Friday) Registration Includes: Proceedings, Breaks
Commercial Participation (Tutorial or Paper or Table) Registration Includes: One full complimentary registration
Commercial Participation (All three) Includes: Two full complimentary registrations

<u>Attendee Registration</u>	ON/BY 28 February 2010	AFTER 28 February 2010
<input type="checkbox"/> IEEE Member	US\$450	US\$560
<input type="checkbox"/> Non Member	US\$570	US\$710
<input type="checkbox"/> Student or Life Member (IEEE & ACM)	US\$250	US\$330
<input type="checkbox"/> Student Non Member	US\$450	US\$560
<input type="checkbox"/> One Day- Friday - Member	US\$330	US\$450
<input type="checkbox"/> One Day- Friday - Non-Member	US\$415	US\$565
<input type="checkbox"/> Commercial Participation - Tutorial	US\$1500	US\$1500
<input type="checkbox"/> Commercial Participation - Paper	US\$1500	US\$1500
<input type="checkbox"/> Commercial Participation - Six ft. table	US\$2000	US\$2000
<input type="checkbox"/> Commercial Participation - All three	US\$4000	US\$4000

***If you are an Author please provide your paper number (s)** _____
Authors must register by 28 February 2010. The following papers have a max number of pages: HCW Workshop (15 pgs), Best Papers (12 pgs), Regular Papers (8pgs)

<p>How did you hear about IPDPS?</p> <input type="checkbox"/> Internet Search <input type="checkbox"/> Call For Papers <input type="checkbox"/> TCP P Email <input type="checkbox"/> IPDPS Email <input type="checkbox"/> Previous Attendee <input type="checkbox"/> Other _____	<p>Is this your first time attending IPDPS? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>What is your main reason for registering?</p> <input type="checkbox"/> Networking <input type="checkbox"/> Attend Sessions <input type="checkbox"/> Presenting <input type="checkbox"/> Attend Workshops <input type="checkbox"/> Other _____ <p>Do you plan to attend IPDPS 2011 in Anchorage, Alaska, USA on 16-23 May 2011?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe / Undecided
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Will you attend the IPDPS 2010 Banquet on Wednesday evening? Yes No
Would you like to help organize and run IPDPS? If "Yes" what would you like to do? _____ (or e-mail info @ipdps.org)

Additional Items (Banquet to be held on 21 April 2010 at 18:00 - 23:00)

 Qty _____ Additional Banquet Ticket – US\$75 Qty _____ Additional Copy of Proceedings (USB/CD-ROM) – US\$75

Registration	Additional Items	Wire Transfer Fee	TOTAL
\$ _____	\$ _____	\$ _____	\$ _____

***IEEE may use the information you provide us to contact you** from time to time concerning similar IEEE conferences, technical products and services or to ask your opinions. If you **do not want us to contact you** please check here

Visa Assistance Letters: Speakers, Committee Members, and paid attendees requiring visa assistance letters must send an **email** to the IPDPS Production Chair at visa@ipdps.org with the subject line **"IPDPS 2010 visa letter request"**. See IPDPS Web at www.ipdps.org for details.

Refund Policy: All refund/cancellation requests must be provided in writing and received by 16 April 2010. There will be an administrative fee of \$50 deducted from each refund. **All refund requests must be in writing to IEEE MCM, by emailing IPDPS10reg@ieee.org**

METHOD OF PAYMENT:

 CHECK in **US Dollars** (Payable to: IEEE/2010 IPDPS)
 Wire Transfer – US\$30 Transaction fee Please contact IPDPS10reg@ieee.org for wire transfer instructions
 Visa **MasterCard** **American Express** **Discover**

Card Number _____ Expiration Date _____

Name on Card _____ Authorized Signature _____

Mail or Fax Completed Registration Form & Payment To:
 IEEE/MCM: Lisa Boyd, Registrar, 445 Hoes Lane, Piscataway, New Jersey 08855 USA Fax: +1 732 465 6447 E-mail: ipdps10reg@ieee.org