

CREDIT CARD PAYMENT REQUEST FORM

Conference Name: DES Collaboration Meeting, Dec 1 - 4, 2009

Date: _____

Print Name: _____

Email address: _____

Credit Card Number: _____

Card Security Code**: _____ Expiration Date: _____

Registration Fee: _____

Late Registration Fee: _____

Social Fee: _____

TOTAL AMOUNT: _____

Signature: _____

*A receipt will be emailed to you after the charge has been processed.

**The Card Security Code (CSC) is a 3- or 4-digit number printed in the signature field on the back of your credit card.

Item	Description	Fee Schedule
Registration Fee	Registration fee for conference.	Early Members \$85 Early Postdocs/Students \$55 (before Nov 1, 2009) Late Members \$120 Late Postdocs/Students \$75 (on or after Nov 1, 2009)
Social and Transportation Fee	Fee for Thursday dinner and evening buses between downtown Palo Alto and SLAC on Dec. 1 and 2.	\$65 per person

Please fax to 650-926-4229.

ATTN: Queenie Galvez

Questions: Martha Siegel (martha@slac.stanford.edu) or 650-926-4310

DO NOT EMAIL THIS FORM.