

IDIMT 2008 Registration Form

Family Name:	
First Name(s):	
Acad. Title(s):	
Affiliation (institution, company):	
Address, Postal Code, City :	
Country :	
Telephone :	
Fax :	
E-mail:	
Website:	

**I intend to submit a paper
(yes or no):**

Yes No

Title of Paper:

Submitting to session:

**Please register me for the
conference:**

Regular participant

PhD participant

**Register also
1 accompanying person:**

Yes

Hotel Reservation:

Sept. 10-12, 2008

(main conference)

Sept. 9-12, 2008

(incl. PhD session)

Other

(please specify here)

Special food preference:

--

Send to:

Jan Klas, University of Economics, Prague, Faculty of Informatics and Statistics,
Department of System Analysis, nam. W. Churchilla 4, 130 67 Praha 3, Czech Republic

Or fax to:

+420-224-095-499 (To: Jan Klas)

Or email to:

klas@vse.cz