

**Workshop-only Registration Form**

**The completed document must be returned by post, email or fax – no later than June, 10th 2014** :

Université de Strasbourg - Cellule Congrès

Caroline BURGUN

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67100 STRASBOURG - FRANCE

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**This form is to be filled out only by workshop attendees who do not wish to register to the main conference. Main conference attendees may register to workshops via PaperCept.**

**Personal information** (*Please complete legibly and tick appropriate boxes)*

**□ Mr □ Mrs □ Miss**

**Name :**  **Surname :**

**Titre / Fonction :**  **Institution :**

**Adresse :**

**Zip code :**   **City :**

**Country :**

**Phone :**  **Fax :**

**E-mail :**

**Billing address** (*Please complete legibly and tick appropriate boxes)*

**Institution :**

**To the attention of :**

**Adress :**

**Zip code :**   **City :**

**Country :**

**Workshops** (**All workshops will be held on June 24, 2014)**

O Interpolation based techniques for constrained control. From improved vertex control to robust model predictive control alternatives.

-      O Time-delay systems in network: models, stability theory, control, and numeric

-      O Control of large-scale distributed and cooperating systems: recent achievements within the Network of Excellence HYCON2

-      O A set-membership approach to health monitoring of uncertain systems: from theory to application.

**Fees**

O **Regular registration**

Until April 28: **200 €**

From April 29: **300 €**

O **Student registration** (provide a copy of the student card)

Until April 28: **100 €**

From April 29: **150 €**

**Payment**

**No registration will be processed without payment. Registration form must be sent to the Cellule Congrès (see first page)**

**An acknowledgement of receipt for fee payment will be sent after the conference to all participants.**

🞏 Purchase order

It shall be made payable to the attention of: **Université de Strasbourg - Cellule Congrès**

🞏 Bank transfer in €

Please state your name, make sure that your remittance is free of all bank charges for ECC2014 and attach a copy of your bank draft.

**Our bank details are:**

**Account holder**

CELLULE CONGRES UDS

REGIE DES RECETTES

21, RUE MARCHAL LEFEBVRE

67100 STRASBOURG - FRANCE

**Domiciliation** : TPSTRABOURG - 25 avenue des Vosges - 67000 STRASBOURG

**SWIFT / BIC** (Bank Identifier Code) : TRPUFRP1

**IBAN** (International Bank Account Number) : FR 76 1007 1670 0000 0010 0652 222

**VAT Number** : FR 441 30 00 54 57

🞏 Credit card in €

I authorize ECC2014 to debit my credit card which details are above mentioned for the amount of..*…….. €*

**□**  Visa □ EuroCard – Mastercard Expiration date : \_\_\_\_/\_\_\_\_

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CVC code on the back of your card:

Name of the owner of the card: …………………………………………………………………………………

Date: Signature :

**CANCELLATION CONDITIONS**

**Any cancellation or modification must be indicated in writing at** [**congres@unistra.fr**](mailto:congres@unistra.fr)

**For any cancellation from Sunday May 27, the full registration fees will be kept**

**No registration will be confirmed until the full registration fees are paid**

In accordance with law no 78-17, ‘Informatique et liberté’, of 6 January 1978, relating to civil liberty and electronic storage and retrieval of personal information, users are entitled to access and to correct personal data by contacting us at the address below.

Université de Strasbourg – 21, rue du Maréchal Lefebvre – 67100 STRASBOURG

N° de déclaration d’activité : 4267 04090 67