

## COSADE 2011 REGISTRATION FORM

### Second International Workshop on Constructive Side-Channel Analysis and Secure Design Darmstadt, Germany, February 24-25

Please complete the form and send by e-mail or fax to the workshop organisation office before February 15th, 2011. Should you have any questions, please do not hesitate to contact us via e-mail:  
e-Mail: [cosade2011@cased.de](mailto:cosade2011@cased.de).

For Office use only      Reg.-Nr.: \_\_\_\_  
Date: \_\_/\_\_/\_\_      B / R / A

Please send the registration form to:  
**CASED, Mornwegstrasse 32, 64546  
Darmstadt, Germany**

**Telephone : +49 6151 16 50755**  
**Fax : +49 6151 16 4825**  
**e-Mail : cosade2011@cased.de**

### 1. DELEGATE REGISTRATION DETAILS

<i>Name:</i>		<i>Title:</i>	Dr. <input type="checkbox"/>	Prof. <input type="checkbox"/>	Mr. <input type="checkbox"/>	Ms. <input type="checkbox"/>	
<i>Surname:</i>		<i>Sector:</i>	Industry <input type="checkbox"/>	Academic <input type="checkbox"/>	Government <input type="checkbox"/>		
<i>Organisation:</i>		<i>Department:</i>					
<i>Postal Address:</i>							
<i>City:</i>		<i>Country:</i>		<i>Postal Code:</i>			
<i>Telephone:</i>		<i>Fax:</i>					
<i>e-Mail Address:</i>							

### 2. PARTICIPANT REGISTRATION FEES

The regular conference registration fee includes participation to the workshop program and the social event. Please notice that the conference fee covers also the proceedings as handouts and in electronic form, refreshments and lunch for both, regular and student registration. Accompanying guests can be registered for participation in the conference social events for a surcharge.

<b>Early Bird Registration (by February 04th, 2011)</b>	Regular	195 EUR	
	Student*	135 EUR	
<b>Late Registration (after February, 04th 2011)</b>	Regular	220 EUR	
	Student*	160 EUR	
* Full-time student only (a copy of student ID is required with payment)		<b>TOTAL (EUR)</b>	

### 3. PAYMENT

Payment can be made by an International Bank Transfer sent before the conference or via Credit Card Payment (VISA, Master Card). In order for the organizers to identify payments, please make sure that „COSADE2011 “ and your name is clearly referenced.

Type of chosen payment	<input type="checkbox"/> Credit card	<input type="checkbox"/> International bank transfer
<b>PAYMENTS VIA INTERNATION BANK TRANSFER</b>		
<i>Remittee Address (beneficiary):</i>	Technische Universität Darmstadt	
<i>Account Information:</i>	National Account Number: 704 300 International Bank Account Number (IBAN): DE 36 5085 0150 0000 7043 00	
<i>Bank Information:</i>	Bank Name: Stadt- und Kreissparkasse Darmstadt Bank Code (BLZ) : 508 501 50 Bank Identifier Code (BIC): HELADEF1DAS	
<i>VAT Tax Information</i>	VAT Tax ID: DE 111 608 628, VAT Tax No.: 007 226 001 39	

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**PAYMENTS VIA CREDIT CARD**

I hereby authorize the „Technische Universität Darmstadt“, to charge the COSADE 2011 Workshop Fee to my credit card in accordance with the details given below:

<i>Credit Card No.:</i>		<i>Amount Charging:</i>	
<i>Card Holder Name (exactly as it appears on card):</i>		<i>Type: Visa / Master</i>	
<i>Date of Expiry:</i>		<i>Card Security Code (last three digits to the right of the signature strip)</i>	

**5. PARTICIPANT SIGNATURE**

<i>Date:</i>	<i>Signature:</i>
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