

ISOPE-2005: Invoice and Advance Conference Registration Form
15th (2005) International Offshore and Polar Engineering Conference
June 19–24, 2005, COEX Convention Center, Seoul, Korea

Please Type Or Print Clearly

NAME _____ (Circle) Male Female
 Surname (Last) Forename (First) Middle I.
 TITLE (Circle) Prof. Dr. Mr. Mrs. Ms. Spouse's Name (if attending) _____
 MAILING ADDRESS (full address including company name)
 Company _____ Dept _____
 Street _____ City _____ State (province) _____ Zip(postal) _____
 Country _____ Office Phone _____ Fax _____ E-mail _____

Paper Number (if author or co-author): 2005- _____ - _____

Sponsor and Cooperating Societies (circle one): ISOPE ASCE (USA) CAPP (Canada) CSCE (Canada) CSOE (China) CSNAME (China) CSTAM (China) DKMM (Germany) GMT (Germany) IE (Australia) IFREMER (France) IRO (The Netherlands) JSMS (Japan) KCORE (Korea) KSCE (Korea) KSN AJ (Japan) NPF (Norway) OES (U.K.) PII (Indonesia) RAS (Russia) SOBENA (Brazil) SPRI (UK) SSSS (Singapore) VTT (Finland) USME (Ukraine)

I pay at ISOPE member rate: Membership number _____ I pay at cooperating society member rate: Membership number _____

ADVANCE REGISTRATION FEES

Please check boxes as appropriate and fill in the amount to be paid. All persons attending the conference are required to register and pay the appropriate fee. **After May 18, add a surcharge of \$80.**

Category	Advance Registration Fee (US\$)*	
	2+days	1 day
See DEADLINES	580	480
<input type="checkbox"/> ISOPE Members	580	480
<input type="checkbox"/> Author, Co-author, Chair, Co-Chair (non-ISOPE members)	620	520
<input type="checkbox"/> Member of Coop. organizations	620	520
<input type="checkbox"/> Non-member	650	550
<input type="checkbox"/> New ISOPE member application (incl. 2005 membership fee and one year journal issues)	670	570
<input type="checkbox"/> ISOPE Membership fee, 2005	90	90
<input type="checkbox"/> ISOPE Member Full-time Student: 2005 ID	360	—
<input type="checkbox"/> Nonmember Full-time Student with 2005 ID	390	—
<input type="checkbox"/> New student member application (incl. 2005 membership fee and one year journal issues)	410	—
<input type="checkbox"/> Additional /Separate Banquet Ticket	65	65
<input type="checkbox"/> 1-day registrant must circle one: Monday Tuesday Wednesday Thursday		
<input type="checkbox"/> For direct air mailing of CD-ROM(s) of 4-volume ISOPE-2005 conference proceedings to your address, add: USA \$5 Canada \$5 Other countries \$10		

Conference Tour and Spouse Program: Find details in this program
 If register **after May 18**, add \$80
 For tour update, see Update on www.isopec.org

TOTAL AMOUNT DUE US\$ _____

The **full** Conference registration fee (2 days or more) includes the conference reception, a conference banquet, tea breaks, and a CD-Rom of the 2,800-pp. (est.) **4-volume** conference proceedings.

* The **1-day** registration fee includes CD-Rom(s) of the **4-volume** conference proceedings, the conference reception, tea breaks.

DEADLINES FOR ADVANCE CONFERENCE REGISTRATION

1) March 31, 2005 for the presenting author (or co-author) per paper.
2) May 18, 2005 for others. Completed Advance Registration Forms with correct amount of payment (or remittance) in US Dollars will be processed until May 18, 2005, and paid participants will receive confirmation. Forms received after **May 18** are subject to a surcharge of US\$80. **Registrants will not be individually invoiced.**

CANCELLATIONS - Request in writing for cancellation of registration received by **May 23, 2005** only will be granted a refund minus US\$70 handling fee except an author per paper published in the proceedings.

METHOD OF PAYMENTS: Make checks or international money orders (payable to ISOPE). Payments must accompany this Advance Registration Form.

- Enclosed is an international money order or a check drawn on a bank in the USA for the amount of US\$ _____. A check drawn on a bank outside the USA will not be accepted.
- I am paying by credit card (only MasterCard, Visa or Amex is accepted). *The card number should be typed in bold face or written clearly to be readable in the transmitted fax copy.*

Card No. _____
 Cardholder's Name _____ Exp. Date _____
 Signature _____ Date _____, 2005

Fax this registration form with correct amount of payment to:
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Copy or download from www.isopec.org. Complete and send this form with correct amount to reach ISOPE no later than May 18, 2005.