



**International Conference on Silicon
Carbide and Related Materials**
September 18-23, 2005
Pittsburgh, PA, USA

**ADVANCE
REGISTRATION
FORM**

**Advance Registration
Deadline:**
August 29, 2005
Forms received past this
date will be processed at
the on-site fee.
**PAYMENT MUST
ACCOMPANY FORM.**
Instructions: Check your selections,
and fill in the necessary information.

W E B	Take advantage of the convenience of online preregistration via TMS' Web site: www.tms.org . Web registration requires credit card payment.	F A X	Fax this form to TMS Meeting Services at 724-776-3770. Fax requires credit card payment.	M A I L	Return this form with payment to TMS Meeting Services 184 Thorn Hill Road Warrendale, PA 15086 USA

Please print or type. ☐ Dr. ☐ Prof. ☐ Mr. ☐ Mrs. ☐ Ms. This address is: ☐ Business ☐ Home ☐ New Address ☐ Address Correction

Surname: _____ First Name: _____ Middle Initial: _____

Employer: _____ Title: _____

Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

Telephone: _____ Fax: _____

E-mail Address: _____ Accompanying Person's Name for Badge: _____

(Guests do not receive admission to technical sessions.)

Registration Fees: Advance Fees On-site Fees
Through August 29 After August 29
Full Conference* \$725 \$825
Student** \$250 \$350
(Students must attach a copy of their school identification card.)

* Includes technical sessions, welcoming reception, continental breakfast, banquet, luncheons, poster session breaks and a copy of the post-conference proceedings
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Social Function Tickets:

Ticket for Students/Guests
Banquet Fee \$65
Dietary Restrictions ☐ Vegetarian ☐ Kosher ☐ Other (Please specify.) _____
Luncheon Package (for guests only) - includes lunch for Monday, Tuesday, Wednesday and Thursday
Quantity _____ Total \$ _____

Additional Post-conference Proceedings:

Proceedings will be published in January 2006. One copy will be shipped to each full conference registrant when the book is available.

Additional copies of the ICSCRM proceedings

Proceedings	Fee	Quantity	Total
	\$110	_____	\$ _____

TOTAL FEES: \$ _____

Payment Options:

☐ Check payable to TMS in U.S. dollars drawn on a U.S. bank
☐ VISA ☐ MasterCard ☐ American Express ☐ Diners Club

Card Number _____
Expiration Date _____
Cardholder Name (Please print.) _____
Signature _____

Refund Policy:

Written requests must arrive at TMS no later than August 29, 2005. A \$75 processing fee is charged for all registration cancellations.

For registration questions, telephone TMS Meeting Services at (800) 759-4867 in the U.S. or (724) 776-9000, ext. 243, elsewhere or email mtgserv@tms.org.