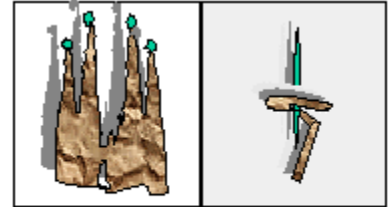


On-Site Conference Registration

Payments Received after December 1st.

December 15th – 18th



ICIS'02

Read the following cancellation and payment policies:

Cancellation Policy:

- ?? Refund of conference registration fee, less an administrative bank fee of \$25, will be made if FAXED/MAILED SIGNED notice of cancellation is received no later than NOVEMBER 15, 2002 to the AIS Headquarters in Atlanta, Georgia, USA. Note that if membership was included with your registration, this will also be cancelled unless you request that the charge for membership remain.

- ?? Refunds from FAXED/MAILED SIGNED cancellation requests received by the AIS Headquarters in Atlanta, Georgia, USA after NOVEMBER 15, 2002 and BEFORE DECEMBER 1, 2002 will be made less a \$100 cancellation fee. Note that if membership was included with your registration, this will also be cancelled unless you request that the charge for membership remain.

- ?? Email cancellations, cancellations received DECEMBER 2, 2002 or later, and cancellations not put in writing – including signature of registrant – will not be accepted and the registrant will be liable for the full conference fee.

Check Payments:

- ?? Conference registration will not be processed until full payment is received. (This may include assessed late fees incurred due to payment receipt after posted registration deadlines.)
- ?? Make checks payable to AIS and bring it with you to the ICIS Conference Registration desk.
- ?? Receipts for check payments will be mailed from the AIS Headquarters in Atlanta, Georgia, USA. Please allow 10-15 business days from date of receipt for process and delivery time.
- ?? U.S. Federal ID 36-3471141

Credit Card Payments:

- ?? Bring your signed application to the ICIS Conference Registration desk.

After DECEMBER 1, 2002, registration is available on-site.

IMPORTANT: Information entered here will be used on all receipts, attendee lists, and name badges.

Complete each section below in detail to ensure prompt and accurate processing of your application. (* Denotes required information)

First Name

*First Name to be printed on badge

Middle Initial

*Last Name

*Mailing Address

City

State/Province

*Zip/Postal Code

*Country

Country Code

*Phone with area code

Fax with area code

*University/Affiliation
(Printed on name on badge)

*Email Address

Special Meal Requests
Circle only one

VEGETARIAN VEGAN KOSHER NO SHELLFISH

ICIS Registration Fees

Your conference registration includes: Access to conference activities, Reception on Sunday December 15, Social Event on Monday December 16, Lunches during the conference Monday and Tuesday December 16 and December 17.

Regular Registration Rates for Payments Received On-Site December 15, 2002

(Currency Converter: <http://www.oanda.com/convert/classic>)

If your AIS Membership expiration date is between today and the final date of the ICIS 2002 conference (December 18), you will be required to renew your membership during this registration. You may renew with your registration by selecting the “Regular Registration” rate. In order to attend ICIS, all registrants must be current AIS members.

**Academic On-Site AIS Member: Membership status will be verified.
Member Number: _____**

Academic On-Site Registration (includes one year membership in AIS)

**Student On-Site AIS Member: Membership status will be verified.
Member Number: _____**

Student On-Site Regular Registration (includes one year membership in AIS)

Corporate



If you select one or more of the following journals, a coupon will be e-mailed to you. The coupon and payment for each journal should then be postage mailed to the publisher of each journal to begin or renew your subscription. For descriptions of each journal, refer to <http://www.aisnet.org/serv.shtml#discounts>

- | | |
|--|--|
| <input type="checkbox"/> Information & Management | <input type="checkbox"/> Journal of MIS |
| <input type="checkbox"/> Journal of Information Systems | <input type="checkbox"/> Journal of Organizational Computing & Ecommerce |
| <input type="checkbox"/> European Journal of Information Systems | <input type="checkbox"/> Journal of Strategic Information Systems |
| <input type="checkbox"/> Information Systems Journal | <input type="checkbox"/> MIS Quarterly |
| <input type="checkbox"/> Information Systems Research | <input type="checkbox"/> DATABASE for Advances in Information Systems |
| <input type="checkbox"/> Journal of Information Technology | <input type="checkbox"/> The Information Society |

HOTEL INFORMATION (<http://dsi.esade.es/icis2002>)

Hotel Princesa Sofia Inter-continental****

The Hotel Princesa Sofia Inter-Continental Barcelona is the Conference venue of the ICIS'02.

It is located in Barcelona's new financial center, right on Diagonal Avenue, Barcelona's main street. It is within close vicinity of public transportation for connections to all business and cultural points of interest. The hotel is located next to the largest shopping malls in Barcelona.

It is only a 20 minutes drive from the Barcelona International Airport.

Use the accommodation form to make your hotel reservation found at the following URL:

http://dsi.esade.es/icis2002/accomm_form.htm

PAYMENT: Purchase orders and faxed copies of checks on the way are not considered payment. Payment must be received by AIS Headquarters on or before the registration date posted in order to qualify for that rate. Late fees will be added to your registration on each deadline date. By submitting your payment with this ICIS 2002 registration form you are agreeing to the above cancellation policy.

Check Payment

Credit Card Payment – Total: \$_____

**I am enclosing check number: _____
in the amount of \$_____ for
ICIS 2002 Registration.**

Signature: _____

Make check payable to:

**AIS
ICIS Conference Registration
P.O. Box 2712
Atlanta, Georgia 30301-2712
United States of America**

Office Location:

**AIS
ICIS Conference Registration
35 Broad Street, Suite 917
Atlanta, Georgia 30303
United States of America**

U.S. Federal ID 36-3471141

You may bring this registration form with you on-site:

Credit Card Number (VISA or MasterCard ONLY):

Expiration Date: _____

Cardholder's Name as it appears on credit card:

Cardholder's Complete Billing Address:

Signature of Cardholder Authorizing the Charge:
