

“Detectors for Astronomy 2009”

Garching b. München, 12-16 October 2009

PAYMENT OF REGISTRATION FEE
BY CREDIT CARD

NAME OF PARTICIPANT : _____

• **Registration Fee:** Euro 100.00

CREDIT CARD: Visa Master Card American Express

Name (as it appears on card): _____

Card number: _____

Expiry date: _____
(Month/Year)

SIGNATURE: _____

C. STOFFER
Office for Science
Fax: +49 89 320 06 480