

Fax to: (5982) 7069629 extension 6.

AMW REGISTRATION FORM October 23th – 26th, 2007 Hotel Las Cumbres, Punta del Este, Uruguay			
Last name:		Name:	
Title:		Gender: (Male/Female)	
Institution:			
Address:			
City:		Country:	
E-mail:			
Telephone:		Fax:	
Vegetarian: YES/NO		Special menus? YES/NO -	
Registration Fee			
	1st Period - Until 28th September		2nd Period
<input type="checkbox"/> Academics (shared room Hotel Las Cumbres)	<input type="checkbox"/> U\$S 700		<input type="checkbox"/> U\$S 800
<input type="checkbox"/> Academics (single room Hotel Solanas)	<input type="checkbox"/> U\$S 700		<input type="checkbox"/> U\$S 800
<input type="checkbox"/> Companion	<input type="checkbox"/> U\$S 600		<input type="checkbox"/> U\$S 800
<input type="checkbox"/> Students	<input type="checkbox"/> U\$S 400		<input type="checkbox"/> U\$S 500
Hotel Reservations in Montevideo:			
NH Hotel (room U\$S 65) :			
Meliá (single U\$S 75 – double U\$S 85):			
Check in date:		Check out date:	
Check in date:		Check out date:	
<input type="checkbox"/> Single		<input type="checkbox"/> Double	
Room Mate YES/NO		Room Mate's name:	
Registration total:			
Hotel total:			
TOTAL :			
Payment options:			
<input type="checkbox"/> Credit Card VISA, MC, DN, AMEX, N° OCA,			
Exp.Date:		Sec. Code:	

