





Author Registration Form

*Please complete and return this form by* ***October 20th, 2021 with the proof of registration (Copy of Postal Transfer or Credit card)***

by Email to [ai-csp@univ-eloued.dz](mailto:ai-csp@univ-eloued.dz)

#### ALL Payment should be done in DZD to:

|  |  |
| --- | --- |
|  | **Account Number (DZD only):** 003 00394 101608300047 **Bank Name:** B.A.D.R Guemar, El Oued, Algeria **Name of Beneficiary:**BEKKOUCHE OUAHIB  **Motif:** Enregistrement AI-CSP |

**PERSONAL INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title (Prof/Dr/Mr./Ms./Mrs.):** | | | | | |
| **First Name:** | | | | **Last Name:** | |
| **Paper Category:**  **Online**  **Regular**  **Student\***  **15 000.00 DA 25 000.00 DA [online] 12 000.00 | [regular] 20 000.00**  ***\* P.S. All students should present their student cards to benefit 20% of reduction.*** | | | | | |
| **Paper EasyChair ID:** | | **Paper Title:** | | | |
| **Institution:** | | | | | |
| **Address:** | | | | | |
| **Postal Code:** | **City:** | | | | **Country:** |
| **Phone:** | **E-mail1:** | | | | **E-mail2:** |
| **Date and City of arrival: (if Regular)** | | | **Date and City of departure: (if Regular)** | | |

The registration fees of regular option include proceedings, attendance to all sessions, lunches and coffee breaks on all 2 conference days, 1 social event ticket (Gala Dinner).

**Date: Signature:**