

REGISTRATION FORM

*Ecommerce 2001 Summit
Taos Convention Center
March 8, 2001*

Name: (Last, First, Middle): _____

Organization: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Phone Number: _____ Fax Number: _____ E-mail: _____

SUMMIT COSTS:

(Includes general summit expenses, refreshments and lunch)

Please complete and FAX registration form to (505-667-7530) by March 2, 2001

Registration Fee: \$30.00

Special Needs: _____

Make check payable to Ecommerce 2001
Credit Cards will be accepted (**Visa and Mastercard only**)
You will receive a receipt at the summit registration desk.

Credit Card: _____
Card Number: _____
Expiration Date: _____
Signature: _____

LANL Participants:

Please provide cost center/program code/cost account/work package for registration fee:

_____/_____/_____/_____

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