

## REGISTRATION FORM

### INTERNATIONAL ACADEMY OF BUSINESS AND PUBLIC ADMINISTRATION DISCIPLINES (IABPAD) CONFERENCE

**July 22-25, 2019- NOVOTEL Hotel**

**Athens, Greece**

Last Name: \_\_\_\_\_ First Name & Middle Initial \_\_\_\_\_

Organization/Affiliation \_\_\_\_\_

Email: \_\_\_\_\_ Phone No. \_\_\_\_\_

Submission Title(s) and Paper Number(s): \_\_\_\_\_  
\_\_\_\_\_

Appropriate track (s) for your paper \_\_\_\_\_

Your coauthor(s): \_\_\_\_\_  
\_\_\_\_\_

- Each person attending the conference must pay the registration fee.
- Registration fee is US **\$500 by credit card, money transfer, or PayPal (\$475 by check)** per person for one or two submissions if paid **June 15, 2019. Each additional submission is \$25.00.**  
Late registration fee is US **\$550 by credit card, money transfer or PayPal (\$525 by check)** per person if paid **after June 15, 2019.**
- Registration fee is US **\$325 by credit card, money transfer, or PayPal (\$300 by check)** for a full-time student, late registration is **\$ 375 by credit card, money transfer, or PayPal (\$350 by check)**  
(Student should attach a letter signed by Department Head verifying full-time status)
- **Registration fee is not refundable**
- Method of payment: University/College Check \_\_\_\_\_  
Personal Check \_\_\_\_\_  
Money Order \_\_\_\_\_  
Credit Card \_\_\_\_\_ (please fill the card information on the second page  
and submit it with the registration form)  
Money Transfer \_\_\_\_\_
- Please make your payment payable to **IABPAD** and mail it with the registration form to:  
**Dr. Raja Nassar, Conference Chair**  
**IABPAD,**  
**P.O. Box 295**  
**Ruston, Louisiana 71273**
- Please indicate if you wish to serve as: \_\_\_ Discussant \_\_\_ Session Chair

If yes, indicate your area of interest\_\_\_\_\_

- Do you want a vegetarian meal? \_\_\_\_\_ Yes \_\_\_\_\_ No

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#### REGISTRATION FEE

PAID BY

CREDIT CARD

Last Name: \_\_\_\_\_ First Name & Middle Initial \_\_\_\_\_

Master Card

Discover

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Credit Card Number:

Credit Card Expiration Date:

Credit Card Billing Address:

#### Authorized Registration Fee to be Charged:

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- Registration fee is US **\$325** for a full-time student, late registration is **\$375**  
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- **Registration fee is not refundable**

Authorized Name:

Signature:

If you submit a *complete paper* to include in the *proceedings* of the IABPAD Conference and you intend to submit it later for publication in one of the IABPAD affiliated journals, then include only the abstract in the proceedings. IABPAD cannot publish a paper in a journal that has been published in the conference proceedings.

Please check one of the two options below:

- I wish to publish the abstract in the proceedings
- I wish to publish the full paper in the proceedings