An International Workshop on "Fracture of Materials: Moving Forwards"

23 – 25 January 2006, Sydney, Australia

School of Aerospace, Mechanical & Mechatronic Engineering, Bldg J07, University of Sydney, NSW2006, Australia

Workshop2006 Registration Form/Tax Invoice/Receipt

ABN: 15 211 513 464

Please return this form via facsimile or airmail or Email.

To: Dr. Hong-Yuan Liu
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New South Wales 2006, Australia
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Registration Fees including Goods & Service Tax (GST) of 10%

<table>
<thead>
<tr>
<th>Fees (in Australian Dollar ONLY)</th>
<th>Registration (before 15th Nov 2005)</th>
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<tbody>
<tr>
<td>Full Registration¹</td>
<td>□ Aus$ 650</td>
</tr>
<tr>
<td>Participation Registration²</td>
<td>□ Aus$ 500</td>
</tr>
<tr>
<td>Full-time Student Registration³</td>
<td>□ Aus$ 450</td>
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Additional Tickets (for student or accompanied persons only)

<table>
<thead>
<tr>
<th>Conference Banquet</th>
<th>Welcome Reception</th>
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<tr>
<td>Aus$ 90</td>
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Total Payment

Aus$

¹Full registration fee includes access to welcome reception, all sessions, Proceedings, Coffee-breaks and Luncheons, Conference Banquet.
²Participation registration covers access to welcome reception, all sessions, Coffee-breaks and Luncheons, Conference Banquet but no proceedings. This registration is only for the attendants who did not publish papers in the Proceedings. ³Full-time student registration covers access to all sessions, Coffee-breaks and Luncheons, Proceedings, based on provision of a copy of student ID. Cancellations with partial refund will be admitted (75% refund before 15th Dec, no refund after this date). Registration may be transferred to another person without extra cost.

Payment Method

If total payment is paid by cheque or bank draft (in Australia dollars), please make payable to “University of Sydney” and post it together with this registration form to us. If total payment is paid by credit card, please complete the following section

Visa □ MasterCard □ Diners Club □
Card Number: ____________________________
Expiry Date: _____ (MM) ______ (YY)
Name of Card Holder (Please print):________
Signature: ____________________________ Date: ____________________