



Student Verification & Payment Form

(Applicable to Undergraduate, Master and Doctoral Students)
(Please fill out and fax or e-mail back to SCS in order to receive your student discount)

STUDENT INFORMATION:

Full Name: _____

Badge Name: _____

Phone Number: _____ E-mail: _____

Mailing Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

SCHOOL INFORMATION:

Name: _____

Address: _____

City: _____ State: _____ Postal Code: _____

Country: _____

Faculty Advisor's Name: _____

Phone Number: _____ E-mail: _____

CONFERENCE INFORMATION:

Symposium on Simulation for Architecture and Urban Design

Are you purchasing a workshop? **Y / N** (please circle)

If yes, what is the workshop name?: _____

TOTAL DUE:..... \$ _____

Method of Payment

Credit Card: MC VISA AMEX DISCOVER Other (please contact SCS)

Credit Card Number: _____ Exp. Date _____

Name on Card: _____

Billing Address: SAME AS ABOVE

Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

I hereby attest that I am a full-time student at the above listed educational institution. I authorize The Society for Modeling & Simulation (SCS) to verify my student status by contacting the above listed faculty member. I acknowledge that the information provided in this statement is accurate and complete to the best of my knowledge and is provided by me of my own free will for the sole purpose of receiving the SCS student discount.

Date: _____

Signature: _____

SCS CONFERENCE CANCELLATION/REFUND POLICY

All SCS conference cancellations and requests for refunds must be made in writing and sent to the [SCS Main Office](#). Requests may be e-mailed, mailed or faxed (contact information below). Telephone requests will not be honored.

Full Refunds – More than 30 Days Notice To receive a full refund, SCS must receive written requests no later than 30 days prior to the first day of the conference.

50% Refunds – Less than 30 Days Notice Refund requests received within 30 days of the start of the conference will be subject to a 50% refund.

No Refunds – Within 2 Weeks

Refund requests received within 2 weeks of the start of the conference will not be eligible for a refund.

Author Refunds

Authors who have their papers included in the proceedings are not eligible for a refund. Authors may receive a refund if they withdraw their papers before the paper is included in electronic or hard-copy proceedings.

Emergency Illness or Death of Registrant or Immediate Family Member: Refunds may be granted if an attendee is unable to attend the Conference due to a family death, illness, or other extraordinary circumstance. In such a circumstance, the SCS Main Office must be contacted by phone, letter or e-mail. SCS will refund fees as soon as possible and no later than three (3) weeks after the conference has concluded.

Substitution Policy: Registrants may send a substitute in their place in lieu of requesting a refund.

To request a refund, contact the SCS Main Office at:

The Society for Modeling & Simulation International
Conference Cancellation/Refund Inquiry
11315 Rancho Bernardo Rd. Suite 139
San Diego, CA 92127

E-mail: scs@scs.org

Fax: 858-277-3930

Phone: 858-277-3888

<http://www.scs.org>