Student Registration Form

Fifth Annual Northwestern Regional Conference Consortium for Computing Sciences in Colleges

October 3-4, 2003 Central Washington University, Ellensburg, WA

Personal Data			Student Registration Data			
Type of address:	☐ Home ☐ Institution		Early On Site Amount (By Sept. 15)			Amount
	Business		Registration:	\$25	\$25	
Name:	e:		Reduced student rate			
Position:						
Department:			Proceedings:	\$10	\$10	
Institution:						
Address:			Friday Banquet & Saturday Lunch: Vegetarian?	\$25	\$25	
				□No		
City:				☐ Yes		
State/Zip:						
Phone:			Total (sum of amou	unts paid):		
Fax:						
Email:						
I 🗌 do 📋	do not wish my name included in	a publish	ed participant list.			
I 🗌 do 📋	do not wish my name added in the	e CCSC 1	istserver(s).			
Registration available at a	includes the following: access to al extra cost.	l vendors	s and sessions. Mea	ıls and cop	vies of the P	Proceedings are
	checks or P.O.'s out to CCSC (the redit cards. The Consortium will ass					
Please mail	this form along with your payment	t to:				

Dr. Jerry Roth Department of Computer Science Gonzaga University, MSC 2615 502 East Boone Avenue Spokane, WA 99258-2615 For more information, please see the conference Web site at http://www.ccsc.org/northwest/2003/

or its mirror site at http://www.cwu.edu/~ccscnw/2003/ Contact Dr. Roth at roth@cps.gonzaga.edu or by phone at (509) 323-3919