

Partner Registration Form

Check/PO #: _____

DB entry: _____

**Ninth Annual Northwestern Regional Conference
Consortium for Computing Sciences in Colleges
October 12-13, 2007 — Linfield College, McMinnville, Oregon**

Personal Data

Partner Name: _____

Your Name: _____

Position: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

Email: _____

Registration data

Amount

Registration \$150 _____

Friday Banquet Ticket
(Vegetarian? Y N) \$25 _____

Saturday Lunch Ticket
(Vegetarian? Y N) \$10 _____

Total (sum of amounts paid): _____

Registration includes a table in the special vendor's area and access to all sessions. Meals are available at extra cost.

Please make checks or P.O.'s out to CCSC (the Consortium for Computing Sciences in Colleges). CCSC does not accept credit cards. The Consortium will assess a charge of \$25 for each check returned to it by the issuing bank.

Please mail this form along with check to:

Ronald Tenison
Linfield College
6205 SW Wilson
Beaverton, Oregon 97008.

For more information, please see:
<http://www.ccsc.org/northwest/2007/>

or for questions, contact at:
tenison@verizon.net
503-646-4031