

Check/PO #: _____
DB entry: _____

**Student Registration Form**  
**Twelfth Annual Northwestern Regional Conference**  
**Consortium for Computing Sciences in Colleges**  
**October 8–9, 2008 — George Fox University, Newberg, Oregon**

**Personal Data**

Type of address:  Home  
 Institution

Name: \_\_\_\_\_

Faculty Advisor: \_\_\_\_\_

Department: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Student Registration Data**

	Early	On Site	Amount
	(by 10/1, for students)		
Registration:	\$25	\$25	_____
<i>Reduced student rate</i>			
Proceedings:	\$10	\$10	_____
Friday Banquet Ticket:	\$25	_____	_____
Vegetarian? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Saturday Lunch Ticket:	\$10	_____	_____
Vegetarian? <input type="checkbox"/> No <input type="checkbox"/> Yes			
<b>Total</b> (sum of amounts paid):			_____

\_\_\_\_\_

Dorm room reservation  Yes  No. Occupancy\_\_\_\_\_

Parking permit  Yes  No.

I  do  do not wish my name included in a published participant list.

I  do  do not wish my name added in the CCSC listserver(s).

Registration includes the following: *access to all vendors and sessions. Meals and copies of the Proceedings 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 your payment to:**

Clinton Jeffery, Ph.D.  
Computer Science Department  
University of Idaho  
P.O. Box 441010  
Moscow, ID 83844-1010

For more information, please see the conference Web site at  
<http://www.ccsc.org/northwest/2010/>

Or contact Dr. Jeffery at [jeffery@uidaho.edu](mailto:jeffery@uidaho.edu)  
or by phone at (208) 885-4789