

REGISTRATION FORM – ITiCSE 2011

ACM SIGCSE 16th Annual Conference on Innovation and Technology in Computer Science Education
Darmstadt, Germany, June 25-29, 2011

Name: First _____ Middle _____ Last _____

Company/School _____ Nickname for badge (Optional) _____

Work/Mailing Address _____

City _____ State/Prov _____ ZIP/Post code _____ Country _____

Phone Number _____ E-Mail Address _____

Check here if you do not want your name to appear on the attendee list.

Special services required _____ Special dietary requirements _____

Fees below are in US Dollars. Registration includes entrance to sessions and exhibits, a USB stick of the conference proceedings, two lunch buffets, and the banquet on Wednesday evening (provided you register by June 15 and space is still available when you register).

Check here if you would like to join ACM's SIGCSE. The cost is \$25 (professional) or \$8 (student). Note that joining SIGCSE allows you to register for the conference as a SIGCSE member and save on the conference registration fee.

Check one registration fee	Early	Late	Late registration is on or after May 28, 2011 and until June 15, 2011.
MEMBER (ACM or SIGCSE) (# : _____)	\$500	\$600	MEMBER rate applies only to ACM or SIGCSE members.
NONMEMBER	\$625	\$725	Join SIGCSE and save. See first box above.
STUDENT	\$250	\$250	Bring evidence of <u>full</u> -time student status to conference.
ACCOMPANYING PERSONS (Includes lunch buffets and banquet)	_____ @ \$150 = \$_____ One ticket to the banquet is included with registration.		
PRINTED PROCEEDINGS	_____ @ \$35 = \$_____		
EXCURSIONS	Walking tour of Darmstadt: _____ @ \$35 = \$_____		
	Bus tour to Heidelberg: _____ @ \$75 = \$_____		
TOTAL AMOUNT DUE	<div style="border: 2px solid black; display: inline-block; padding: 2px;">\$ _____</div> Include all applicable fees: SIGCSE membership, registration, accompanying person tickets, printed proceedings, and excursions.		

CHECK # _____ (Make all checks payable in U.S. dollars and drawn on a U.S. bank to ACM/ITiCSE 2011)

CREDIT CARD <input type="checkbox"/> MC <input type="checkbox"/> Visa <input type="checkbox"/> AMEX	Card # _____
Expiration Date _____ Security code _____	Signature _____
Billing Address (if different from above) _____	
City _____ State/Prov _____ ZIP/Post code _____	Country _____
Phone Number _____	

SEND REGISTRATION FORM to one of the following addresses (you will receive a confirmation by e-mail):

E-MAIL: iticse-registrar@csse.rose-hulman.edu

FAX: +1-812-872-6060

MAIL[†]: ITiCSE 2011 Registration Services, CM 100

Department of Computer Science and Software Engineering

Rose-Hulman Institute of Technology

5500 Wabash Avenue, Terre Haute, IN 47803-3999, U.S.A

CANCELLATION requests must be sent to one of these addresses by June 15, 2011. A processing fee of \$100 will be assessed.

[†] If using postal mail, please follow with an e-mail message to iticse-registrar@csse.rose-hulman.edu indicating that the form has been sent.