CHI 96

April 13-18, 1996
Vancouver, Canada

Advance Registration Form

Mail or Fax Form To:
CHI 96 Registration
P. O. Box 8304
Maitland, FL 32794 USA
Fax: +1 407 628 3186

For Express Mail only:
CHI 96 Registration
Registration Systems Lab
2060 Goldwater Court
Maitland, FL 32751 USA

First Name _____ Last Name _____

Name on Badge _____

Company/Institution _____

Address _____

_____

City, State/Province _____

Postal Code _____ Country _____

Tel _____

Fax _____

E-mail _____

Check boxes for more information and/or requests:

☐ Childcare ☐ Accompanying persons

☐ Special Needs and Access: _____

☐ I do NOT want my name to be on a mailing list given or sold to outside organizations.

☐ I am a member of: _____

☐ * Check here if you do NOT want to receive the ACM and SIGCHI membership included in the non-member fee. This will not change the conference fee.

☐ I am a full-time student and am providing proof of current student status with my registration.

WWW 960310 ps

CONFERENCE AND TUTORIAL FEES IN U. S. DOLLARS

(Please circle the appropriate fees)	On or Before March 14, 1996			March 14 to April 12, 1996			Onsite-After April 12, 1996		
	Student	Member	Non-member	Student	Member	Non-member	Student	Member	Non-member
Conference Only	$125	$390	$504*	$135	$590	$704*	$145	$790	$904*
Each Tutorial unit with Conference	110	255	255	120	355	355	140	555	555
Each Tutorial unit without Conference	110	315	315	120	415	415	140	615	615

TUTORIAL SELECTIONS

(circle tutorial numbers and total number of units)

Saturday Evening (1 Unit)
1 2 Saturday units: _____

Sunday Full-day (2 Units)
3 4 5 6 7 8 9 10 11 12 13 14 15
Sunday units: _____

Monday Full-day (2 Units)
16 17 18 19 20 21 22 23 24 25 26

Monday Morning (1 Unit)
27 28

Monday Afternoon (1 Unit)
29 30 Monday units: _____

Total Tutorial Units (maximum of 5 units): _____

Alternative tutorial selections:
Saturday: _____ Sunday: _____ Monday: _____

If CEU is desired, please provide your social security or other personal identification number below:
SS or other PID#: _____
Compute the appropriate CEU fees in payment computation.

PAYMENT COMPUTATION

Conference Fee ..... $ _____

Tutorial Units: ☐ x $_____ ..... $ _____
x $5 (CEU fee if desired) $ _____

Extra Reception: ___ ticket(s) x $50..... $ _____

NTSC Video: _____ x $20..... $ _____

PAL Video: _____ x $25..... $ _____

Extra Proceedings: _____ x $50..... $ _____

Extra Companion: _____ x $25..... $ _____

Tee-shirts: _____ x $8..... $ _____
Circle shirt size: M L XL

Sweat shirts: _____ x $12..... $ _____
Circle shirt size: M L XL

Polo shirts: _____ x $20..... $ _____
Circle shirt size: M L XL

Mugs: _____ x $5..... $ _____

TOTAL FEES $

Credit Card #: _____ Expires: _____

Cardholder's name _____

Cardholder's signature _____

Billing Address: _____
(if different from above)

Forms without payment will not be processed.

Make checks and money orders payable in U.S. Dollars to ACM/CHI 96.

Purchase orders, government vouchers, and wire transfers are not accepted and will be returned to sender.

If paying by VISA, MasterCard or American Express, please provide credit card information.