

AUTHOR REGISTRATION FORM - SEDE-2012

JUNE 27-29, 2012 Omni LA Hotel at California Plaza, Los Angeles, CA, USA

All registration materials must be received by May 25, 2012 for your paper(s) to be published in the proceedings.

Please complete this form (TYPE or PRINT) and return before May 25, 2012.

PAPER # _128_ Number of Pages _7_

FIRST Name _Frederick_ MI _C_ LAST Name _Harris_

Title (Dr.) **and** (Mr.) Position _Professor_ Organization _University of Nevada, Reno_

Address _Dept. of Computer Science & Engineering MS 171_

City _Reno_ State/Province _NV_ Zip/Postal Code _89557_ Country _USA_

Telephone _775-784-6571_ Fax _775-784-1877_

E-mail _Fred.Harris@cse.unr.edu_ List your areas of interest _____

PLEASE NOTE: NON-MEMBERS who would like to become a **NEW ISCA** member at this time, or if you would like to **renew** your ISCA Membership at this time, please check both the ISCA MEMBER RATE * **and** the 2012 ISCA MEMBERSHIP** boxes below. (ISCA Membership is from January 1, 2012 through December 31, 2012)

ISCA MEMBER RATE *	\$450.00	<u>_450_</u>
NON-MEMBER	\$550.00	<u>_____</u>
2012 ISCA MEMBERSHIP **	\$100.00	<u>_____</u>
ADDITIONAL FEES:		
Extra page fee (per paper):	\$ 60.00 / each page	<u>_60_</u>
Additional PAPERS, if any:	1/2 registration fee/ each	<u>_____</u>
Additional Luncheon Ticket:	\$ 50.00 / each	<u>_____</u>
Additional SEDE-2012 Proceedings :		
ISCA member	\$ 50.00 / each	<u>_____</u>
Non-member	\$ 70.00 / each	<u>_____</u>
Proceedings (BOOK format) can be ordered online at www.proceedings.com approximately two weeks after the conference.		
	TOTAL:	<u>_510_</u>

METHOD OF PAYMENT: Check Money Order Visa MasterCard

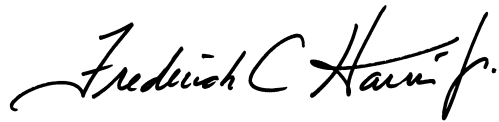
Payment may be made by check, International money order (in U.S. dollars drawn on a U.S. Bank made payable to ISCA), or credit card in U. S. Dollars.

Credit Card # 5405-0154-1818-6936

Expiration Date _07/13_ **Security Number on Back of Credit Card** _211_

Print Name as it appears on Card _Freerick C Harris, Jr_

Billing Street Address No. _1664 M Virginia St MS 171, Reno NV_ **ZIP CODE of Billing Address** _89557_



(Signature REQUIRED)

(PLEASE INDICATE YOUR CHOICE BELOW)

I plan to attend the complimentary LUNCHEON on JUNE 28, 2012 Yes

Special dietary requirements: _____

AUTHOR REGISTRATION FEE: An author may register one paper at this fee. See ADDITIONAL FEES (above) for more than 1 registered paper and extra page charges.

The conference full registration fee includes refreshments during the conference, a Luncheon banquet on JUNE 28, 2012, and one copy of the conference proceedings.

REGISTRATION FEES ARE NON-REFUNDABLE. Please email (as attachments) the (a) camera-ready manuscript with paper code in PDF format ([example: SEDE207.pdf](#)), (b) completed Registration Form with Fees, and (c) signed ISCA Copyright Form, and send to: Email: isca@ipass.net

EIN NO: 56-1799522

For any questions, please contact us via Email: isca@ipass.net or phone: (507) 458-4517;