Registration is required for publication in the proceedings. The registration fee for this conference includes a dinner banquet on Friday evening, lunch on Saturday, and a copy of the proceedings.

## Name:

|  |  |  |  |
| --- | --- | --- | --- |
| First:  | Click here to enter text. | Last:  | Click here to enter text. |
| Badge name : | Click here to enter text. |

## Address:

|  |  |
| --- | --- |
| Street 1 |  Click here to enter text. |
| Street 2 |  Click here to enter text. |
| City |  Click here to enter text. | State | Click here to enter text. | Zip |  Click here to enter text. |

## Other Contact Information:

|  |  |
| --- | --- |
| E-Mail |  Click here to enter text. |
| Affiliation |  Click here to enter text. |

## Status (Select One)

|  |  |  |
| --- | --- | --- |
| **Position** | **On Time Fee****Postmarked On/Before March 20** | **Late Fee****Postmarked After March 20** |
| ☐ | 2 Day Faculty/Professional | $60 | $70 |
| ☐ | 1 Day Faculty/Professional | $30 | $40 |
| ☐ | Student | $20 | $30 |
| ☐ | Spouse/Guest | $20 | $30 |

**Please make checks payable to Shippensburg University**

## Please indicate if you plan participate in any of the following:

 ☐ Programming Contest ☐ Robotics Contest

 ☐ Presenting a talk ☐ Presenting a poster

 List any special needs for your poster Click here to enter text.

 ☐ Other (Workshop, BOF, …) Click here to enter text.

## Please indicate if you are willing to:

 ☐ Serve as a poster judge ☐ Serve as a session chair

 ☐ Assist with the programming contest. ☐ Assist with the robotics contest.

## Please return this form to:

|  |  |
| --- | --- |
|  E-Mail: jlee@cs.ship.edu | USPS: PACISE REGISTRATION Department of Computer Science and EngineeringMCT 156 Shippensburg University 1871 Old Main Drive Shippensburg, PA, 17257-2299 |