Information Security Summer School

2005 Official Registration Form

FULL NAME

Last	**First**	**MI**

POSTAL ADDRESS

Street Address / Apartment Number

City	**State / Province**	**ZIP / Postal**	**Country**

CONTACT INFORMATION

e-Mail Address (Please include the domain name!)

( )   ( )

Daytime Telephone Number   **Evening Telephone Number**

UNIVERSITY INFORMATION

Name of Institution Currently Attending / Instructing

Degree Sought / Position Title	**Expected Graduation Date (students only)**

MAILING INFO

Mail this completed form to the following address:

IS3 2005 c/o Melody McGuire
Florida State University
253 Love Building
Tallahassee, FL 32306-4530

Or submit a completed PDF via email to the following address::

mmcguire@cs.fsu.edu

DISPLAY

❑ I wish to bring display materials for the Job Fair.

If you wish, you may bring display materials to share with the conference members during our Job Fairs. Please check this box if you wish to do so and we will contact you to assess your space requirements and other considerations.

Please contact Melody McGuire with any questions: 850.644.2644 or mmcguire@cs.fsu.edu
Or visit our website at: http://www.sait.fsu.edu/is3

Limited seats are available!
Please register as soon as possible!