

**WACE 9th International Symposium on
Cooperative & Work-Integrated Education**

Hosted by
GEORGIA INSTITUTE OF TECHNOLOGY

REGISTRATION

**Please send completed form via fax: 978-934-4084,
Postal Mail: WACE, Attn: Michelle Hansford
600 Suffolk Street ▪ Lowell, MA 01854 U.S.A.,
or Email: michelle_hansford@uml.edu**

Registrant's Information

PLEASE CHECK HERE IF THIS IS YOUR FIRST WACE EVENT.

Honorific: Ms. Mrs. Mr. Dr. Prof.

First Name: _____

Last Name: _____

Name to Appear on Symposium Badge (*if* different than above):

Job Title / Designation: _____

University / Organization: _____

Mailing Address: _____

_____ City State / Province Country Postal Code

Telephone Number: _____ Fax Number: _____

E-Mail Address: _____

Registrant Payment

Please note that all monetary values are in USD.

Registration

WACE Member: \$475 USD

Non-Member: \$590 USD

One Day Registration

WACE Members & Non-Members: \$225 USD

(Includes: One day of the symposium, symposium materials, and symposium tote.)

If you have selected a "One Day" registration, please indicate which day you will attend:

Wednesday, November 14, 2012

Thursday, November 15, 2012

Friday, November 16, 2012

(Registration cont'd on next page - -)

Other Registration Types

Undergraduate & Graduate Student: \$285 USD

Guest: \$100 USD

Number of Guests: _____

(Includes: opening reception; three luncheons; and closing reception & dinner.)

Please provide the Guest(s)'s name(s): _____

Please include the Guest's payment with your payment.

YOUR TOTAL PAYMENT: \$ _____ USD

Payment Method

Credit Card (We accept MasterCard and Visa)

Credit Card Number: _____

Expiration Date: ____ / ____
(month) (year)

Name on Card: _____

Billing Address: Same as Above Mailing Address

Other

Billing Address: _____

City State / Province Country Postal Code

Check

Please make checks payable to: WACE

Mail to: WACE 600 Suffolk Street / Lowell, MA 01854 / USA

Attn: Michelle Hansford, WACE Director of Global Communications & Marketing

Bank Transfer

For Bank Transfer information, please contact Michelle Hansford @ michelle_hansford@uml.edu.

Cancellation Policy

Cancellation fee \$50 USD prior to October 15, 2012.

No refund after October 15, 2012.

There will be a \$50 USD charge for all returned checks.

Forms without payment will not be processed until payment is received.

Other

Please indicate any dietary or other requirements here: _____