**AUTHOR REGISTRATION FORM - CAINE-2015
October 12-14, 2015, Hilton San Diego Harbor Island Hotel, San Diego, California,, USA**

**All registration materials must be received by AUGUST 25, 2015 for your paper(s) to be published in the proceedings.**

Please complete this form **(TYPE or PRINT)** and return **before August 25, 2015 AS E-MAIL ATTACHMENT TO ISCA@ipass.net

PAPER #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Number of Pages** \_\_\_\_\_\_\_\_\_\_\_\_\_

**FIRST Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **LAST Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Organization** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State/Province** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Zip/Postal Code** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Country** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone (with country code/area code)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E-mail** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**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 for 2015 at this time, please check both the ISCA MEMBER RATE \* and the 2015 ISCA MEMBERSHIP\*\* boxes below. (ISCA Membership is from January 1 through December 31, 2015).**

|  |  |  |
| --- | --- | --- |
| ISCA MEMBER RATE \* | $450.00 | \_\_\_\_\_\_\_\_\_ |
| NON-MEMBER | $550.00 | \_\_\_\_\_\_\_\_\_ |
| **2015 ISCA MEMBERSHIP \*\*** | $100.00 | \_\_\_\_\_\_\_\_\_ |
| **ADDITIONAL FEES:**  |  |  |
| Extra page fee (per paper): | $ 60.00 / each page | \_\_\_\_\_\_\_\_\_ |
| Additional PAPERS, if any:  | 1/2 registration fee/ each | \_\_\_\_\_\_\_\_\_ |
| Additional Luncheon Ticket: | $ 50.00 / each | \_\_\_\_\_\_\_\_\_ |
| **Additional Proceedings :**  |  |  |
| ISCA member  | $ 50.00 / each | \_\_\_\_\_\_\_\_\_ |
| Non-member  | $ 70.00 / each | \_\_\_\_\_\_\_\_\_ |
| **Proceedings (BOOK format) can be ordered online at** [**www.proceedings.com**](http://www.proceedings.com) **approximately two weeks after the conference.** |  |  |
|  | TOTAL: | \_\_\_\_\_\_\_\_\_ |

**METHOD OF PAYMENT:** \_\_\_\_\_\_\_\_Visa \_\_\_\_\_\_\_\_MasterCard \_\_\_\_\_\_\_\_US Check

Payment should be made by Credit Card (Visa or Master card) in U.S. Dollars. Fees may be paid by a check (in U.S. dollars drawn on a U.S. Bank made payable to ISCA).

**Credit Card #** \_\_ \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ \_\_

**Expiration Date** \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ **Security Number on Back of Credit Card** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Print Name as it appears on Card** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Billing Street Address No.** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ZIP CODE of Billing Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Signature REQUIRED)**

**PLEASE INDICATE YOUR MEAL CHOICE BELOW

I plan to attend the complimentary Conference LUNCHEON on OCTOBER 13, 2015**

****Yes **** No (Please select dietary Requirement below)

**Special dietary requirements:**  Vegetarian\_\_\_\_\_\_\_\_ Non-vegetarian\_\_\_\_\_\_\_\_\_\_

**You must specify your meal preference to guarantee availability**

**Please send this completed form along with your Registration Fee information using e-mail attachment to: isca@ipass.net**

**AUTHOR REGISTRATION FEE:** An author may register one paper at the regular 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, and one copy of the conference proceedings.

**REGISTRATION FEES ARE NON-REFUNDABLE. Please email (as attachments) the (a) completed Registration Form with Fees, and (b) signed ISCA Copyright Form, and send via Email to: isca@ipass.net**

**EIN NO: 56-1799522**

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