

## CCSCNE 2016 Registration Form

Hamilton College  
April 29-30, 2015  
Clinton, NY

### Student Attendee

Your registration includes admission to all conference activities including the vendor display, the conference banquet on Friday evening and the pre-conference workshops (if space is available). If you would like copies of the Proceedings, or guest tickets for the Friday evening banquet, please indicate below. Please note that there is NO Saturday luncheon.

|                                                                                                                                                                           |        |      |                                                                                                                                     |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Please mail the registration form below with check made out to CCSC (Consortium for Computing Sciences in Colleges) to:                                                   |        |      |                                                                                                                                     |                          |
| Mark Hoffman, Registration Co-Chair<br>Mathematics/Computer Science Dept.<br>Quinnipiac University<br>275 Mount Carmel Ave., TH-ENR, Hamden, CT 06518                     |        |      | Email: <a href="mailto:mark.hoffman@quinnipiac.edu">mark.hoffman@quinnipiac.edu</a><br>Phone: (203) 582-8449<br>Fax: (203) 582-8709 |                          |
| Name:                                                                                                                                                                     |        |      |                                                                                                                                     |                          |
| Email:                                                                                                                                                                    |        |      |                                                                                                                                     |                          |
| Address:                                                                                                                                                                  |        |      |                                                                                                                                     |                          |
|                                                                                                                                                                           |        |      |                                                                                                                                     |                          |
| City, State, Zip:                                                                                                                                                         |        |      |                                                                                                                                     |                          |
| Are you a student presenter?                                                                                                                                              | Yes    | No   | Are you part of a programming team?                                                                                                 | No Yes: (Name of school) |
| If you are a presenter or on a programming team, list advisor's name and e-mail below.                                                                                    |        |      |                                                                                                                                     |                          |
| Advisor's Name:                                                                                                                                                           |        |      |                                                                                                                                     |                          |
| Advisor's E-mail:                                                                                                                                                         |        |      |                                                                                                                                     |                          |
| Do you wish to be included (with your contact information) in the participants list?                                                                                      |        |      | YES                                                                                                                                 | NO                       |
| <b>Conference Information:</b>                                                                                                                                            |        |      |                                                                                                                                     |                          |
| Item                                                                                                                                                                      | Number | Cost | Total                                                                                                                               |                          |
| Early Registration Fee (postmark by April 8, 2016)                                                                                                                        |        | \$50 |                                                                                                                                     |                          |
| Late Registration Fee (postmark after April 8, 2016) and onsite Registration                                                                                              |        | \$50 |                                                                                                                                     |                          |
| Extra Banquet Ticket                                                                                                                                                      |        | \$30 |                                                                                                                                     |                          |
| Proceedings                                                                                                                                                               |        | \$10 |                                                                                                                                     |                          |
| Previous Years' Proceedings (Year + Number)                                                                                                                               |        | \$10 |                                                                                                                                     |                          |
| TOTAL: (Make check payable to CCSC. Receipts will be provided on request. The Consortium will assess a charge of \$25 for each check returned to it by the issuing bank.) |        |      |                                                                                                                                     |                          |
|                                                                                                                                                                           |        |      |                                                                                                                                     |                          |
| Will you attend the Friday Banquet?                                                                                                                                       | Yes    | No   |                                                                                                                                     |                          |