**ATTENDEE REGISTRATION FORM: SEDE-2013  
September 25-27, 2013, Omni Los Angeles Hotel at California Plaza, Los Angeles, California, USA**

Please complete this form **(TYPE or PRINT)** and return **by August 15, 2013 for early registration rate.**   
  
**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 2013 at this time, please check both the ISCA MEMBER RATE \* and the 2013 ISCA MEMBERSHIP\*\* boxes below.  
(Membership is from January 1, 2013 through December 31, 2013)**

|  |  |  |
| --- | --- | --- |
| **EARLY REGISTRATION FEE (RECEIVED BY AUGUST 15, 2013)** | | |
| ISCA MEMBER | $450.00 | \_\_\_\_\_\_\_\_\_ |
| NON-MEMBER | $550.00 | \_\_\_\_\_\_\_\_\_ |
| 2013 ISCA MEMBERSHIP | $100.00 | \_\_\_\_\_\_\_\_\_ |
| \* STUDENT | $ 25.00 | \_\_\_\_\_\_\_\_\_ |
| (includes ISCA student Membership) |  |  |
| **\* The luncheon banquet and Conference Proceedings are NOT included with student registration but may be purchased separately.** | | |
| **REGISTRATION FEE (RECEIVED AFTER AUGUST 15, 2013)** | | |
| ISCA MEMBER | $550.00 | \_\_\_\_\_\_\_\_\_ |
| NON-MEMBER | $650.00 | \_\_\_\_\_\_\_\_\_ |
| 2013 ISCA MEMBERSHIP | $100.00 | \_\_\_\_\_\_\_\_\_ |
| \* STUDENT | $ 25.00 | \_\_\_\_\_\_\_\_\_ |
| (\*includes ISCA student Membership) |  |  |
| **ADDITIONAL FEES:** |  |  |
| Additional Luncheon Ticket: | $ 50.00 / each | \_\_\_\_\_\_\_\_\_ |
| **Additional Proceedings :** |  |  |
| ISCA member | $ 50.00 / each | \_\_\_\_\_\_\_\_\_ |
| Non-member | $ 75.00 / each | \_\_\_\_\_\_\_\_\_ |
| **Proceedings (BOOK format) can be ordered online at** [**www.proceedings.com**](http://www.proceedings.com) **approx. two weeks after the conference.** |  |  |
|  | **TOTAL:** | **\_\_\_\_\_\_\_\_\_** |

**METHOD OF PAYMENT:**  \_\_\_\_\_\_Visa \_\_\_\_\_\_MasterCard \_\_\_\_\_\_\_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 September 26, 2013 **Yes **** No

**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 attachments to: isca@ipass.net**

For any questions, please contact ISCA: Telephone: (507) 458-4517; E-mail: isca@ipass.net