

Form A

Global & Local Women's Studies: Going on Forty

CONFERENCE PRE-REGISTRATION

	1 Day	2 Days	# Registering/price	Total
Regular Attendee	\$95.00	\$110.00	_____ @\$_____ =	_____
CSU Faculty/Staff	\$85.00	\$100.00	_____ @\$_____ =	_____
Undergraduate/Graduate Student	\$60.00	\$75.00	_____ @\$_____ =	_____
High School Student	\$30.00	\$45.00	_____ @\$_____ =	_____
Groups (8 or more)	15% off applicable prices		_____ @\$_____ =	_____
Personal Assistants (for attendees w/disabilities)	\$35.00	\$40.00	_____ @\$_____ =	_____
Shuttle Service (to and from campus and designated hotels- \$20 per person fee)			_____ @\$ 20.00=	_____
Voluntary Scholarship Donation (to subsidize conference registrations for individuals with limited means)				\$ _____
Total Amount Enclosed				\$ _____

Name(s) of registrant(s) paid for on this form: _____

Please make checks payable to SCSU Women's Studies Program

Credit Card Registration

Type of Card Master Card Visa

Credit Card # _____

Expiration Date _____

Print Name _____

Signature _____

Conference registration fees include all conference materials and events, including sessions, keynotes, art reception, the Women's Fair, and all meals and beverage breaks. This conference is self-supporting; registration fees are calculated based on the actual costs of organizing the conference.

Please postmark all materials by October 10, 2007 to ensure pre-registration rates. Registrations postmarked after October 10 will be charged the on-site registration fee, which is \$5.00 higher in each category than the pre-registration fees listed here.

The Women's Studies Program regrets that it cannot refund conference registration payments.

Form B

Global & Local Women's Studies: Going on Forty

CONFERENCE PRE-REGISTRATION

Please provide all of the information requested below. Please duplicate for multiple registrations.

Name: _____

Affiliation (for name badge): _____

Mailing Address: _____

Phone (daytime): _____ Email: _____

(evening): _____ Fax: _____

Presenter Non-presenter Personal assistant to: _____

May we include you on our network list? Yes No
(This list will be restricted to SCSU use only)

I will attend (Please mark all that apply):

Friday Dinner Saturday Lunch Saturday Reception

Which hotel will you be staying at?

Clarion Courtyard by Marriott Omni Hotel La Quinta
(was Fairfield Inn)

Please indicate special needs or food restrictions below:
(Food served at the conference will include dairy, but not meat or fish.)

All spaces used for the conference are wheelchair accessible.

Please mail completed registration forms to:
Southern Connecticut State University
Women's Studies Program
501 Crescent Street
New Haven, CT 06515
Attn: Cerella Griffin

Fax registration forms to:
203-392-6723

Email registration forms to:
griffinc1@southernct.edu

Please be sure to fill out forms A **and** B and mail, fax, or email materials by October 10, 2007 to ensure pre-registration rates.