

17th ACMS Conference Registration Form

May 27-30, 2009 • Wheaton College

Name _____

Mailing Address _____

Email Address _____

College, University or other work affiliation _____

Is this your first ACMS conference? Yes No

If not, approximately how many conferences have you attended? _____

List up to 3 main academic interests _____

List up to 3 non-academic interests _____

Registration: \$110 (\$95 if submitted by May 1) _____

(Students pay half price for registration, room and board)

Dorm room: _____

\$29/night single; \$21/night double

Plus a \$10 linen fee for entire stay

If a double, give roommate preference _____

Check nights desired:

Tuesday Wednesday Thursday Friday

Board: (Package plan includes Wednesday dinner thru Saturday breakfast)

Package Plan: _____ @ \$80.00 _____

Individual meal tickets:

Breakfast _____ @ \$7.00

Lunch _____ @ \$9.00

Dinner _____ @ \$12.00

Friday Banquet _____ @ \$28.00 _____

Voluntary Contribution: To help cover reduced student fees _____

Total _____

Send a check for the total amount payable to ACMS to:
ACMS Conference,% Dept. of Mathematics, Wheaton College, Wheaton, IL 60187.