

Advance Registration Form

1 First Name _____ M.I. _____ Last Name _____

Company or School _____

Address _____

City _____ State _____ Zip Code _____ Country _____

Phone _____ Fax _____

E-mail _____

2 AFFILIATION

Please check one:

ACM Student # _____

Student school ID # _____

ACM | SIGPLAN# _____

Non-Member

Special Needs: _____

Check here if you do NOT want your name on the conference mailing list.

Please **TYPE** or **PRINT** carefully

Mail this form to:

OOPSLA '99

P. O. Box 941156

Maitland, FL 32794-1156 USA

Fax: +1-407-628-3186

For overnight mail only:

OOPSLA '99

c/o Registration Systems Lab

2060 Goldwater Court

Maitland, FL 32751 USA

3 TUTORIALS

Please circle Tutorial numbers below

UNITS

Monday Full-day 2 2 3 4 5 6 7 9

Monday Morning 1 11 12 14 15 16 17 19 20 21 22 23

Monday Afternoon 1 24 25 26 27 28 29 30 31 32 33 34 36 55

Mon/Tue. Two-day 4 10

Tuesday Full-day 2 37 38 39 40

Tuesday Morning 1 18 42 43 44 45 46 47 48 49 50 51

Tuesday Afternoon 1 52 53 54 56 57 58 59 60 61 62 63

Wednesday Full-day 2 1 41

Wednesday Afternoon 1 13 64 65 66 67 68 69 70 71 72

Thursday Afternoon 1 73 74 75 76 77 78 79 80 81

Total Units Add tutorial units above; the maximum number of units is 7.

Alternative tutorials: _____

Forms will NOT be processed without payment. Make checks payable to OOPSLA '99. If paying by VISA, MasterCard, American Express, or Diner's Club, please complete the following section in full:

Credit Card No: _____ Expires: _____

Name as on card _____

Cardholder's signature _____

Credit Card billing address if different from section 1

4 CONFERENCE AND TUTORIAL FEES in U. S. DOLLARS

(circle the appropriate fees)	On or Before September 23, 1999				After September 23, 1999			
	ACM Student	Student	Member	Non-member	ACM Student	Student	Member	Non-member
Conference Fee Only	\$60	\$80	\$330	\$410	\$60	\$80	\$430	\$510
One-day Only Conference Fee:	30	40	165	205	30	40	215	255
Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>				
Tutorials: per Unit Fee	40	50	230	260	40	50	280	310
Educators' Symposium	30	40	100	120	30	40	145	165

5 PAYMENT COMPUTATION

1. Conference or One-day Conference Fee \$ _____

2. Tutorial Fee: _____ unit(s) x \$ _____ \$ _____

3. Educators' Symposium \$ _____

4. Additional "Wings" Event: _____ ticket(s) x \$70 \$ _____

5. Full set of Tutorial Notes: _____ set(s) x \$700 \$ _____

TOTAL FEES ENCLOSED: \$

6 DESIGNFEST SIGN UP

I am willing to serve as: Moderator Recorder Participant
(check all that apply)

Choose one session: Monday Morning Wednesday Full-day Wednesday Afternoon Thursday Afternoon

Space is limited. There is no charge for participation, but you must register for the full conference and sign up on or before September 23, 1999. The Designfest is highly interactive! Passive observers should not sign up. Please supply your email address in section 1 above.

Where did you hear about OOPSLA:

- a. CACM
 b. Component Strategies
 c. C++ Report
 d. IEEE Computer
 e. Internet Computing
 f. JOOP
 g. Java Report
 h. Email
 i. Usenet Newsgroups
 j. Web
 k. Friends & Associates

Please check all that apply:

- User I am Y2K ready!
 Developer I am not Y2K ready
 Manager I am special
 Academic This is my first
OOPSLA