

#### How to Register for Computers in Libraries

- 1. Compute your registration fee (Section A).
- 2. Complete all personal information (Section B).
- 3. Indicate your payment method (Section C).
- **4.** Return your completed form by phone, fax, or mail.

A. Registration Fees	Ву	After
Preconference Workshops	Feb. 14	Feb. 14
Tuesday, March 11		
(includes lunch)		
☐ Workshop 1 (full day—see page 22)	\$199	\$209
☐ Workshop 2 (full day—see page 22)	\$199	\$209
AM □ 3 □ 4 □ 5	\$129	\$139
PM □ 6 □ 7 □ 8	\$129	\$139
Postconference Workshops		
Saturday, March 15 (includes lunch)		
☐ Workshop 9 (full day—see page 24)	\$199	\$209
AM 🗖 10 🗖 11 🗖 12 🗖 13 🖵 14	\$129	\$139
PM 🗖 15 🗖 16 🗖 17 🗖 18 🗖 19	\$129	\$139
Full 3-day Conference		
Does not include Pre or Postconference workshops		
Wed., March 12 - Fri., March 14	\$349	\$359
I select the following day only:		
☐ Wednesday, March 12	\$179	\$189
☐ Thursday, March 13	\$179	\$189
☐ Friday, March 14	\$179	\$189
Computers in School Libraries		
☐ CISL 2-day conference (Fri. & Sat.)		
(includes lunch on Saturday)	\$199	\$209
☐ CISL 2-day conference +		
Full CIL Registration (Wed.–Sat.)	\$379	\$389
☐ CISL 2-day conference + Thurs. Workshop (Thurs.–Sat.)	<b>#200</b>	#200
☐ Thursday Workshop Only	\$299	\$309
- Harsday Workshop Only	\$199	\$209
TOTAL		

## REGISTRATION FORM

B. Personal Inf	ormation			
Name				
Title				
Organization				
Street				
City, State, Zip				
Phone	Fax			
E-mail				
Your Type of Library: (Cl 1 College/University 2 Corporate/Business 3 Other (please specify)	4☐ Government 5☐ Public	7 <b>□</b> K-12		
Your Job Function: (Check One)				
1☐ Director	6☐ Researcher			
2☐ Serials Librarian	7☐ Systems Librarian			
3☐ Reference Librarian	8 Acquisitions Librarian			
4☐ Corporate Librarian 5☐ Other (please specify)	9□ Administrator			

### C. Payment Method

- · · · · · · · · · · · · · · · · · · ·						
4, 2003 (After t	his date regist	vanced registration and be er at the conference). Cl Information Today, Inc.	heck or money order			
☐ Check or money order enclosed for the amount of \$						
Charge to:	☐ Visa	☐ MasterCard	☐ AMEX			
Account Number						
Exp. Date						
Signature						

# PHONE, FAX, MAIL, OR E-MAIL YOUR REGISTRATION TO:

### **Computers in Libraries 2003**

143 Old Marlton Pike, Medford, NJ 08055 Phone: 609-654-6266 • Fax: 609-654-4309 E-mail: custserv@infotoday.com Web site: www.infotoday.com

Duplicate this form as necessary. Payment and registration form must be received together. Discount & Team Registration from the same organization must be mailed together.