



Registration Form

please print or duplicate this form as necessary

1 Name _____

Social Security # and Birthday _____

Affiliation _____

Subject Area You Teach _____

Department _____

2 Please enter the address to which you want materials sent

Street _____

Street _____

City _____ State _____ Zip _____

Daytime Phone _____ Fax _____

Email _____

Special Needs _____

3 The Institute fee is \$1500; you may send payment now or when you receive your bill. Full payment must be received by May 30, 2006.

___ Enclosed is my check or money order for Writing New Media (payable to MTU-D93238).

___ My check or money order will be mailed when I receive my MTU bill.

4 Return this completed form and your payment to:

Michigan Technological University, Conferences and Institutes, 1400 Townsend Drive, Houghton, MI 49931.

for office use only:

Date Received ____/____/____ Check/MO# ____/____

Amount Paid ____/____/____ Receipt Sent ____/____

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