

IWARI Workshop Registration Form

Please print legibly and complete information in full

Company _____

Your Name _____

Address _____

City, State, Zip _____

Phone _____

Email _____

Primary Business _____

Today's Date _____ Dietary Restrictions _____

PAYMENT INFORMATION (Cost \$300 – Check one below):

CASH CHECK CHARGE

(Please check one of the above boxes)

CHECK # _____ (or)

Visa # _____ (or)

AmEx# _____ (or)

MC # _____

Expiration Date _____

Amount _____

Your signature _____

Fax registration form (if using a credit card) or mail with a check to:

The University of Toledo – College of Engineering IWARI Conference

2801 W. Bancroft St. MS 310 Toledo, OH 43606-3390

Questions: Phone: (419) 530-8212 Fax: 419-530-8006 email: info@eng.utoledo.edu

Travel and lodging information is available at the following website:

<http://www-iwari2005.eng.utoledo.edu/pages/registration.htm>