

Registration Form

Ethical Guidance for Research and Application of Pervasive and Autonomous Information Technology (PAIT) March 3-4, 2010, Cincinnati, Ohio

<http://poynter.indiana.edu/pait/>

Title (e.g., Dr., Mr., Ms.)
and Name: _____

Institution/organization: _____

Department or unit: _____

Mailing Address: _____

City, State, Zip: _____

Country: _____

Telephone number: _____

FAX number: _____

E-mail address: _____

URL: _____

Please indicate any dietary and/or mobility restrictions we should know about:

How would you like your first name to appear on your name badge (e.g., Ken or Kenneth)?

- I have sent a statement (500 words/1 page maximum) of what I will contribute to the workshop (e.g., describing my expertise, issues I think are important, cases I can share, ways I can help prepare for and follow-up on the workshop, etc.) via e-mail to [Glenda Murray](#).
- I understand that my contact information (above, not including dietary and mobility restrictions) and my statement of contribution will be distributed to all workshop participants.
- Please subscribe me to the PAIT LISTSERV e-mail list for pre-workshop discussions.

How did you learn about the workshop? Please check all that apply.

- A flyer sent via regular post
- An announcement sent via e-mail
- The World Wide Web
- A friend or colleague
- A print announcement in a newsletter or journal
(title: _____)
- Other _____

Please submit the completed form

via *regular mail* to **Glenda Murray**
Poynter Center-PAIT, Indiana University
618 East Third Street
Bloomington IN 47405-3602

via *FAX* to **812-855-3315**
 or via *e-mail* to glmurray@indiana.edu

Please note that space at the workshop is limited. If the number of registrations exceed expectations, we reserve the right to select among registrants to ensure balance. Please do not make travel plans until you have received confirmation of acceptance. **Registration closes January 22, 2010.**