

# Registration Form

# ALS 2001

November 5-10, 2001

Copy this form as needed. Type or print clearly.

This address will be used for all USENIX mailings unless you notify us in writing.

First name \_\_\_\_\_ Last name \_\_\_\_\_

Name for Badge \_\_\_\_\_ Member Number \_\_\_\_\_

Company/Institution \_\_\_\_\_

Mail Stop \_\_\_\_\_ Mail Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax \_\_\_\_\_

Email Address (one only, please) \_\_\_\_\_

## Attendee Profile

Would you like to receive email about USENIX activities?  Yes  No

Would you like us to provide your name to carefully selected partners? USENIX does not sell its mailing list.  Yes  No

Would you like to be included on the Attendee list?  Yes  No

### What is your affiliation? (check one):

academic  commercial  gov't  consultant  no response

### What is your role in the purchase decision? (check one):

final  specify  recommend  influence  no role  no response

### What is your primary job function? (check one):

- 1.  system/network administrator
- 2.  consultant
- 3.  academic/researcher
- 4.  developer/programmer/architect
- 5.  system engineer
- 6.  technical manager
- 7.  student
- 8.  security
- 9.  Webmaster
- 10.  No response

### How did you first hear about this meeting? (check one):

- 1.  Referral from colleague
- 2.  Postal mail
- 3.  The Web
- 4.  Email
- 5.  Magazine
- 6.  Newsgroup
- 7.  No Response

What publications or Web sites do you read related to the topics of this conference? \_\_\_\_\_

## Payment Must Accompany This Form

Payment (U.S. dollars only) must accompany this form. Purchase orders, vouchers, email, or telephone registrations cannot be accepted.

### MAIL THIS FORM TO:

RCS, 2368 Eastman Avenue, Suite 11, Ventura, CA 93003-7797.

Payment enclosed. Make check payable to **USENIX Conference**.

Charge to my:  VISA  MasterCard  American Express  Discover

Account No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Print Cardholder's Name \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

**You may fax your registration form to 1.805.654.1676 if paying by credit card. To avoid duplicate billing, please do not mail an additional copy.**

## Tutorial Program (Monday-Wednesday, November 5-7)

On or Before October 15, 2001	After October 15, 2001
1 Day Tutorial Package - \$465	1 Day Tutorial Package - \$565
2 Days Tutorial Package - \$780	2 Days Tutorial Package - \$880
3 Days Tutorial Package - \$1095	3 Days Tutorial Package - \$1195
CEU Fee (optional) \$15.00 per day	

Check only one tutorial per day (9:00 a.m.-5:00 p.m.)

Monday	Tuesday	Wednesday
<input type="checkbox"/> M1 <input type="checkbox"/> M2	<input type="checkbox"/> T1 <input type="checkbox"/> T2	<input type="checkbox"/> W1 <input type="checkbox"/> W2
<input type="checkbox"/> M3 <input type="checkbox"/> M4	<input type="checkbox"/> T3 <input type="checkbox"/> T4	<input type="checkbox"/> W3 <input type="checkbox"/> W4

### Tutorial Session Checklist:

- 1. Tutorial session package price:..... \$ \_\_\_\_\_
- 2. CEU Fee (\$15 per day; multiply times number of days).. \$ \_\_\_\_\_
- 3. **Total**..... \$ \_\_\_\_\_

Student Tutorial fees (Attach a photocopy of current student I.D.)

CODE NO _____	.....\$70.00	\$ _____
CODE NO _____	.....\$70.00	\$ _____
CODE NO _____	.....\$70.00	\$ _____

## Membership Renewal

Join or renew your USENIX membership..... \$95.00 \$ \_\_\_\_\_

Students: Join USENIX or renew your student membership (attach a photocopy of current

student I.D.)..... \$25.00 \$ \_\_\_\_\_

**TOTAL DUE** \$ \_\_\_\_\_

## Technical Sessions (Thursday-Saturday, November 8-10)

*The ALS and XFree86  
Technical Sessions  
are FREE, but you must  
still register.*

### Note to all XFree86 Conference Registrants:

In order to submit your request to attend an XFree86 Workshop, you must be registered for Thursday Technical Sessions. In order to attend the XFree86 Conference, you must be registered for Friday Technical Sessions.

Check day(s) of week you will attend technical sessions:

<input type="checkbox"/> Thursday, Nov 8	<input type="checkbox"/> Friday, Nov 9	<input type="checkbox"/> Saturday, Nov 10
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**Refund/Cancellation Policy:** Substitutions are always welcome. If it is necessary for you to cancel, we must receive your refund request in writing by Friday, October 26, 2001. You may fax or email your cancellation, but no cancellations can be taken over the phone. If you have any questions, please contact the RCS registration office via email at [usenix@rcsreg.com](mailto:usenix@rcsreg.com) or via phone at 1.805.654.0171.

PLEASE COMPLETE THIS FORM AND RETURN IT, ALONG WITH FULL PAYMENT, TO:

RCS  
2368 EASTMAN AVENUE, SUITE 11  
VENTURA, CA 93003-7797