

REGISTRATION FORM

Please RSVP by Monday, July 2, 2012

Contact: Caterina Runyon-Spears
NSF I/UCRC Smart Vehicle Concepts Center – Summer 2012 Meeting
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Please indicate the name and address of the organization that you will be representing and provide the requested information for each attendee:

Organization: _____

My organization is not a member of the SVC, and I would like to attend part of the closed session on Day 2: _____

Note for Non-Members: A non-disclosure form will be sent to you. It must be returned to us as soon as possible. A list of member organizations is available on our website.

<u>1) Name</u>	<u>Phone Number</u>	<u>Email Address</u>
_____	(____) _____	_____

Mail Address: _____

Dietary restrictions (if any)? _____

I wish to participate in the NASA guided tour: _____

<u>2) Name</u>	<u>Phone Number</u>	<u>Email Address</u>
_____	(____) _____	_____

Mail Address: _____

Dietary restrictions (if any)? _____

I wish to participate in the NASA guided tour: _____

<u>3) Name</u>	<u>Phone Number</u>	<u>Email Address</u>
_____	(____) _____	_____

Mail Address: _____

Dietary restrictions (if any)? _____

I wish to participate in the NASA guided tour: _____