

FACM'12 Registration Form

May 18-20, 2012
Frontiers in Applied and Computational Mathematics
New Jersey Institute of Technology

Name: _____

Current Position: _____

Department: _____

Institution: _____

Address: _____

Phone: _____ E-mail: _____

FACM'12 Registration Fee:

The FACM'12 Registration Fee is \$100 and includes coffee breaks and on-site lunches all three days. Saturday evening banquet is an additional \$50.

_____ I plan to attend the FACM'12 day conference sessions (\$100).

_____ I will also attend the banquet on the evening of Saturday, May 19 (additional \$50)
Please indicate dietary restriction: _____

_____ TOTAL FUNDS ENCLOSED

Enclose a check made payable to *New Jersey Institute of Technology*, and mail with this form to: Ms. Susan Sutton, Department of Mathematical Sciences, New Jersey Institute of Technology, University Heights, Newark, NJ 07102 USA

Poster Submission:

I plan to display a poster: Yes _____ Research Category: _____

I do not plan to display a poster: _____

I wish to be considered for partial travel support: Yes _____ No _____

Please submit your registration form with payment and email your title/abstract (about 200 words in ASCII format only) to suttons@njit.edu by April 2, 2012. We cannot accommodate other file formats. NOTE: Please limit your poster size to a maximum of 4' x 4' due to display board restrictions.