



CONFERENCE ATTENDEE REGISTRATION

First Name Last Name First Name for Badge

Library/System

Address Address 2

City State/Province Zip/Postal Code Country

Phone Fax Email Address

Dynix Customer Number

Emergency Contact Name Emergency Telephone

Guest First Name Guest Last Name

Are you a member of CODI? Yes No

Is this your first time attending the user conference? Yes No

Please select your System category:

- Dynix
- Horizon
- URSA
- Migrating

What type of Library do you work in?

- None
- Public
- Academic
- School (K-12)
- Corporate
- Law
- Medical
- Other _____

If your Library holds a software license as a consortium member, please provide the name of the consortium:

REGISTRATION FEES

Register for the Early Price by October 3, 2005. Register after October 3, 2005 and pay the regular price.

Conference Registration

- | | |
|--|---|
| <input type="checkbox"/> Member – Full Conference
Regular Price: \$425.00
Early Price: \$295.00 | <input type="checkbox"/> Member – Full Conference with Director's Forum
<i>Director's Forum</i>
Sunday, November 6, 2005 9:00 am – 4:00 pm
(Continental Breakfast and Lunch included)
Regular Price: \$425.00
Early Price: \$295.00 |
| <input type="checkbox"/> Non Member – Full Conference
Regular Price: \$475.00
Early Price: \$390.00 | <input type="checkbox"/> Non Member – Full Conference with Director's Forum
<i>Director's Forum</i>
Sunday, November 6, 2005 9:00 am – 4:00 pm
(Continental Breakfast and Lunch included)
Regular Price: \$475.00
Early Price: \$390.00 |
| <input type="checkbox"/> Member/Non Member – One Day
Regular Price: \$190.00
Early Price: \$190.00 | <input type="checkbox"/> Director's Forum only
<i>Director's Forum</i>
Sunday, November 6, 2005 9:00 am – 4:00 pm
(Continental Breakfast and Lunch included)
Regular Price: \$190.00
Early Price: \$190.00 |

If registering for the daily rate, please select specific day of conference you will be attending:

- Monday only (November 7)
- Tuesday only (November 8)
- Wednesday only (November 9)

PERSONAL CONSIDERATIONS: List any special requests or needs you may have such as special diet, medical needs, and/or comments or questions:

Do you require a vegetarian meal? Yes No

Personal Considerations: _____

PAYMENT INFORMATION:

Mail completed registration form along with payment to:
CODI 2005 Conference
3214 N. University Ave. #333
Provo, UT 84604

Enclose check payable to CODI.