

**Workshop on Streaming Systems**  
August 22-23, 2003, Dedham, MA

**REGISTRATION FORM**

First Name: \_\_\_\_\_ Last name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Preferences:

Vegetarian       Kosher       Do NOT include my name on the mailing list

Special needs: \_\_\_\_\_

Select accomodation options (accomodations are limited and will be first-come, first serve):

**CONFERENCE REGISTRATION (required)**.....**\$250.00**  
- Friday lunch, dinner, and breaks      - Saturday breakfast, lunch, and breaks  
- Conference registration and services

**THURSDAY NIGHT STAY**.....**\$190.00**  
- Thursday night room in Endicott House      - Thurs. dinner and Fri. breakfast

**FRIDAY NIGHT STAY**.....**\$190.00**  
- Friday night room in Endicott House

**TOTAL:** \_\_\_\_\_

Payment for the conference **must be via check MADE PAYABLE TO "MIT"**. **No cash or credit cards will be accepted.** Please send checks to:

Sally Lee  
NE43-243  
200 Technology Square  
Cambridge, MA 02139

Checks will also be accepted on-site. However, you must pre-register for the conference; **NO ON-SITE REGISTRATION is available.**

Please remember to include your name on the check, as well as a copy of your registration form (even if you have already sent it.) A confirmation of your registration and payment will be sent to you. Thank you.