REGISTRATION

Seventh Annual Symposium on Information Systems Risks, Security & Assurance

http://www3.uakron.edu/cba/cretisa/

Please print:

Name: _____

(Please use the space below if registering more than one person from the same organization)

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

_____ Symposium fee @ $185 per person **No. of persons _____**

_____ Late fee @ $25 per person **No. of persons _____**

_____ Total Enclosed **Check if vegetarian meals: _____**

Member of: __ ISACA __ IMA __ OSCPA __IIA __ College Professor

__ Other (please specify_____)

Please return with check payable to The University of Akron (CReTISA Account) by February 23, 2008 to:

Akhilesh Chandra
The George W. Daverio School of Accountancy
The University of Akron
Akron, Ohio 44325-4802
Tel: (330) 972-6230
Fax: (330) 972-8597
Email: sharlen@uakron.edu

If you prefer online registration, it is available at http://www3.uakron.edu/cba/cretisa/.

List names here if registering more than one person from the same organization

Name	Organizational affiliation[1]	Email	Special meal requirement (e.g., vegetarian)

1: ISACA, IMA, OSCPA, IIA, Professor, Others (*please specify*)