

REGISTRATION FORM

UNIVERSITY OF LOUISVILLE J.B. SPEED SCHOOL OF ENGINEERING WOMEN IN ENGINEERING CAREER DAY February 18, 2010

Name: _____

Address: _____ Email: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Social Security #: _____

If student: Grade ____ School/County _____ / _____
Year plan on graduating _____

If teacher: Math __ Science __ School: _____ email: _____

If counselor: School _____ email: _____

Special Needs:

Physical Assistance Required: _____

Sign Language Interpreter Required: _____

(Please provide the name and phone number of someone to whom we can speak to make arrangements.)

Dietary Restrictions: _____

Do you plan on driving to campus? _____ Yes _____ No

If so, would you need a parking permit? _____ Yes _____ No

Do you plan to go on a campus tour? _____ Yes _____ No

I have enclosed \$5.00 per person for registration for ____ attendees.

TOTAL ENCLOSED: \$ _____

Please send registration form and check/money order no later than February 5 to:

Prof. Brenda G. Hart
University of Louisville
J.B. Speed School of Engineering
Department of Engineering Fundamentals
Louisville, KY 40292
Phone Number: 502-852-0440
Fax Number: 502-852-6268