

# Society of Composers, Inc.

## Region IV Conference 2010 Registration Form

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Affiliation \_\_\_\_\_

Address \_\_\_\_\_

State, Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

REGISTRATION FEES    Postmarked/faxed on or before January 18.....\$65

after January 18.....\$75

### Payment

Please print this form and mail it or fax it with your payment (check or credit card). Make checks payable to UNCG. You may fax your registration (credit cards only) to 336-334-5497, Attn: Alejandro Rutty. No cash or credit card payments will be accepted on site.

UNCG School of Music  
Attn: Alejandro Rutty/SCI 2010  
P.O. Box 26170  
Greensboro, NC 27402

Credit Card payments (signature required)

- VISA
- MASTERCARD

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Signature \_\_\_\_\_

*By signing, I authorize this payment on my credit card.*