



For Use in Registering for Open Access: The Role and Impact of Preprint Servers

TITLE OF EVENT _____ Open Access: The Role and Impact of Preprint Servers _____

DATE _____ November 14 , 2019 – November 15, 2019 _____

LAST NAME FIRST NAME MIDDLE

ORGANIZATION JOB TITLE

STREET ADDRESS

CITY STATE/PROVINCE ZIP/POSTAL CODE COUNTRY

PHONE NUMBER EMAIL FAX

Please indicate your membership status:

Member **Nonmember**

Student **Institution/School** _____

Registration Fee: Members: \$285.00
Non-Members: \$335.00
Students \$110.00

PAYMENT INFORMATION

CHECK (MAKE PAYABLE TO NISO) INVOICE (PAYMENT IN FULL REQUIRED PRIOR TO DATE OF EVENT)

*For use with emailed forms without a signature. E-mail form to nisohq@niso.org with REGISTRATION FORM in the subject line.

**Return any paper registration forms
with payment to:**

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