

**ADAPTING TO CHANGE: ADOPTING  
NEW STRATEGIES: RACING INTO THE FUTURE**

**FIFTY-SIXTH ANNUAL ORALL CONFERENCE  
INDIANAPOLIS, INDIANA  
WEDNESDAY, OCTOBER 12 - FRIDAY, OCTOBER 14, 2005**

CONFERENCE REGISTRATION FORM

Name: \_\_\_\_\_

Institution/Library: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Please check here if special accommodations will be needed to fully participate.

Describe: \_\_\_\_\_  
\_\_\_\_\_

Registration fee includes all meeting materials, activities, refreshments and meals.

**Event Registration**

Check the events and meals you will attend.

<u>Self</u>	<u>Guest</u>		
<input type="checkbox"/>	<input type="checkbox"/>	<i>Wednesday, Opening Reception, Indiana State Library</i>	
	<input type="checkbox"/>	Additional ticket for guest - \$28.00	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<i>Thursday Breakfast</i>	
	<input type="checkbox"/>	Additional ticket for guest - \$21.00	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<i>Thursday Luncheon</i>	
	<input type="checkbox"/>	Additional ticket for guest - \$22.00	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<i>Thursday Banquet</i>	
	<input type="checkbox"/>	Additional ticket for guest - \$34.00	\$ _____

Please select from the following meal options

	<u>Self</u>	<u>Guest</u>	
1. Breast of Chicken Picatta	<input type="checkbox"/>	<input type="checkbox"/>	
2. Horseradish Crusted Salmon	<input type="checkbox"/>	<input type="checkbox"/>	
3. Indiana Stuffed Double Porkchop	<input type="checkbox"/>	<input type="checkbox"/>	
4. Vegetarian	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Friday Breakfast</i>			
<input type="checkbox"/>	<input type="checkbox"/>	Additional ticket for guest - \$15.00	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<i>Friday Luncheon</i>	
	<input type="checkbox"/>	Additional ticket for guest- \$21.00	\$ _____

Registration Fees: \$ 120.00	\$ _____
Late Registration Fee ( <b>after September 23</b> ): \$145.00	\$ _____
Please make your check payable to ORALL	\$ _____

Send Conference Registration Form and payment to:

ORALL 2005  
Jennifer Bryan  
Indiana University  
School of Law Library  
211 South Indiana Avenue  
Bloomington, Indiana 47405-7001