# Associated Schools of Construction Region 1 Student Competition

Saturday, October 29, 2016

Albany Hilton ▪ 40 Lodge Street ▪ Albany NY, 12207 ▪ (518) 462-6611

# Job Fair Registration Form

# 10:00 AM to 4:00 PM (Job Fair set-up begins at 8:30 AM)

### Please reserve a space for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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City/State/Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### The following people will be representing our company at the job fair:

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

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A $2,500 donation allows participation in the Job Fair. You may deduct $500 if your check is received by Sept. 23, 2016. Your donation provides you:

* Access to view student team presentations in the competitions
* 6 foot table and space behind table for displays (typical college career fair set-up)
* Resumes of all participating students prior to the Job Fair
* Lunch for 2 (*Additional meals can be arranged at cost)*

All Job Fair donations are directly utilized to reduce registration fees for the students and to strengthen the conference. All faculty and industry participants volunteer their time. Please consider a larger donation if possible. The above donation does not include a hotel room. If you want to stay at the hotel on Saturday evening please call Christine Fiori, Region 1 Hotel Coordinator, at (215) 895-0925 or email at: [cmf356@drexel.edu](mailto:cmf356@drexel.edu). If you have any questions please contact Todd Dunn at (585) 475-2900 or email him at: [todd.dunn@rit.edu](mailto:todd.dunn@rit.edu)

**Please make your check payable to “ASC Region 1” and forward your check and this form to:**

ASC Region 1 c/o Michael Emmer (SECCM) Or Credit Card Information

Roger Williams University

□ Visa □ MasterCard Check One (AMEX & Discover not accepted)

Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Amount: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_

Phone # of person submitting payment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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