

Science and Security: Technology and Arms Control for the 1990s

13-14 October 1988
Capital Hilton Hotel ♦ Washington, DC

Critical perspectives on national security in the next decade . . .

What will be the arms control agenda of the 1990s?

How will advances in technology affect that agenda and U.S. security requirements?

Nationally recognized analysts and top-level officials from the present and past administrations will examine these and other issues in this important national meeting.

Whether you are a policymaker, scientist, or concerned individual, you will gain valuable insight by attending this timely forum.

Plenary sessions will address:

- U.S. Defense Technology Base in the 1990s
- Qualitative Factors in Nuclear and Conventional Force Balance
- START Agreement and Beyond: Deep Reductions in Strategic Nuclear Forces
- Future of U.S.-Soviet Relations
- Role of Science in National Security Policymaking

Small group panels will discuss:

- European Security After INF
- Changing Soviet Military Doctrine
- ASAT Weapons/Arms Control

- Verifying Arms Control Agreements
- Nuclear Testing
- Technology Advances in Strategic Defenses

Confirmed panelists include:

- Ambassador Ronald Lehman, DOD
- General Brent Scowcroft, Kissinger Associates
- Thomas Cochran, Natural Resources Defense Council
- Jonathan Dean, Union of Concerned Scientists
- Wolfgang Panofsky, Stanford University
- Ashton Carter, Harvard University

All registrants receive a ***Preconference Reader*** and ***Proceedings***. Financial assistance is available for a limited number of educators; please inquire.

Register now by completing the form on the next page. **For more information** write: Raymond Orkwis, AAAS, 1333 H St., NW, Washington, DC 20005. (202) 326-6490.

AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE

Advance Registration Form

AAAS Science and Security Colloquium

13-14 October 1988 ♦ The Capital Hilton, Washington, DC

SA3

Please print or type

Name _____
(last) (first and initial)

Affiliation _____

Mailing address _____
(street and number)

(city) (state & zip) (telephone number)

Check one: Check enclosed VISA MasterCard
(no other credit cards accepted)

Credit card no. _____ Expiration date _____

Cardholder's signature _____

Check here if you need special services due to a handicap. We will contact you before the meeting.

■ **Publications:** All registrants receive an *Arms Control Reader* before or at the Colloquium and published *Proceedings* after the Colloquium.

■ **Registration materials** will be mailed to preregistrants in late September; however, for registrations received after 22 September, materials will be held at the AAAS Registration Desk in the hotel.

■ **Refund Policy:** Advance registration fees and meal ticket fees will be refunded **after the Colloquium** for cancellations received by 28 September. **No refunds will be made on cancellations received after this date.**

■ **Fees:** ① Nonprofit rates apply to employees of government, academic, and nonprofit organizations. ② Student rates apply only to full-time undergraduate and graduate students and retirees.

Registration Fees	
Regular (with 3 meals)	\$200 \$ _____
Regular (no meals)	\$145 _____
Nonprofit ¹ (with 3 meals)	\$150 _____
Nonprofit ¹ (no meals)	\$ 95 _____
Student ² (no meals)	\$ 40 _____
Separate Meal Tickets	
Lunch (13 October)	\$ 25 _____
Breakfast (14 October)	\$ 9 _____
Lunch (14 October)	\$ 25 _____
TOTAL AMOUNT:	\$ _____

Mail top half (registration form) to:
 AAAS Science and Security
 Colloquium Registration
 1333 H Street, NW, Room 830
 Washington, DC 20005

Hotel Reservation ♦ The Capital Hilton

AAAS Science and Security Colloquium ♦ 13-14 October 1988

Reservations received after 22 September cannot be guaranteed.

Send confirmation to:

Name _____ Street _____

City _____ State _____ Zip _____ Telephone no. _____

Other occupants of room: Name _____ Name _____

Special housing needs due to handicap: _____

Room: Single (\$118)* Double (\$138)* Twin (\$138)* *Add 10% DC sales tax and \$1 occupancy tax.

Arrival: Date _____ Time _____ **Departure:** Date _____ Time _____

Be sure to list definite arrival and departure times. Check-in time is 3:00 p.m.; check-out time is 12 noon.

Enclose separate check, made out to **The Capital Hilton**, for first night's room deposit or provide major credit card information.

Credit card name _____ Number _____ Expiration date _____

Cardholder's signature _____

Mail bottom half (hotel reservation form) to: Reservations, The Capital Hilton
 16th & K Streets, NW, Washington, DC 20036

Science

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