

Registration Form

Surname, First name:

Title, degree, position:

Institution/organization:

Year of birth

Mailing address:

Tel:

E-mail:

I confirm the participation in the conference with the oral/poster presentation/no presentation.

Title:

Name keynote speaker:

Name co-authors:

The form of participation (underline): oral presentation, poster message without a report (the listener).

Publication of abstracts (underline): Yes / No

Need of special invitation (specify, please)

Your suggestions for organization of the conference

Date