**Registration Form**

Please fill out and return by e-mail both to: **armenio@dica.units.it**

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| **Partecipant Information** |
| Title | Mr. Mrs. Miss. Dr. Prof. Other:  |
| First and Last name |  |
| Institution/Affiliation |  |
| Mailing address |  |
| Postal code, city, country |  |
| Telephone |  |
| E-mail address |  |
| Companion(s) name |  |
| - Private Companion- University- Public Institution |  |  | VAT ID N: |

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| **Registration fee** |  |
| Before January 25 | Euro 350 |  |
| Before January 25 (Ercoftac members) | Euro 300 |  |
| Late Registration | Euro 450 |  |
| Late Registration (Ercoftac members) | Euro 400 |  |
| **Dietary Requirements** |
| I am vegetarian |  |
| Other (please specify): |  |

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| **Method of Payment** |
| All payments should be made in Euro by bank transfer, without any bank charges to the organizers.Details for the bank transfer are as follows:Account holder: Università degli studi di Trieste – DIAUNICREDIT BANCA FILIALE “TRIESTE SEVERO B”ABI 02008CAB 02223CIN QC/C: 000003892054IBAN IT 35 Q 02008 02223 000003892054SWIFT CODE UNCRITM10UCReason for payment: DIA – MMTLHE 1024 registration fee for NAME SURNAME**Please attach a copy of the bank transfer order** |

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| Declaration**:** I hereby declare that the above information are true and accurate to the best of my knowledge.Name:

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Date: Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |