

PRELIMINARY REGISTRATION FORM

(fax or e-mail before January 20th, 2014)

E-mail: ipwg2007@gmail.com Fax: +39-051-2096723

PERSONAL DETAILS

| Family Name | | |
|---------------------------------|----------|--|
| FIRST NAME | | |
| Institution/Company | | |
| Address | | |
| CITY | ZIP CODE | |
| Country | | |
| PHONE | FAX | |
| E-mail | | |
| TYPE OF PARTICIPATION | | |
| ☐ Attend the meeting | | |
| ☐ Present an oral communication | | |
| ☐ Present a poster | | |

Note: this form has interactive fields, you can type directly into the pdf, save and send it by email or print and send it by fax.