**Registration Form**

**Please, replace** 🞎  **with x where relevant**

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| **PERSONAL DETAILS** |
| **Title**  | Ms 🞎 | Mr 🞎  | Dr 🞎 | Prof 🞎 | Prof Dr 🞎  |
| **Forename and Surname** |  |
| **Institution/Affiliation, Position** |  |
| **Contact address (street, number, town and postcode, country)** |  |
| **Telephone** |  | **Mobile**  |  |
| **Fax number** |  | **E-mail address**  |  |

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|  **SESSION DETAILS** |
| **Co-presenter(s)** (Please note that each co-presenter must submit a separate Speaker Proposal Form)  |  |
| **Title** (max 10 words) |   |
| **Abstract** (This should accurately reflect the content of your presentation and should consist of max. 100 words.)  |  |
| **Equipment required**  | None 🞎  |
| Data projector (bringing own laptop) 🞎 |
| Computer and Data projector 🞎 |
| Internet connection 🞎 |