***CONFERENCE REGISTRATION FORM***

|  |  |
| --- | --- |
| Title  | Prof/Dr/Capt/Mr/Mrs/Ms\* |
| Name  |  |
| Organisation  |  |
| Address |  |
| City/Zip Code |  |
| Country |  |
| Telephone |  |
| Email address |  |
| Accompanying person’s name |  |
|  |  |
|  |  |
| Visa invitation letter | Yes/ No\* |
|  |  |
| Submitted paper draft | Yes/No\* |
| Title paper draft |  |
|  |  |
| Conference fee\*:  | € Euro / $ CAD |
| Participant | € 600 / $ 900 |
| IMSF Member  | € 450 / $ 700 |
| Paper presenter | € 450 / $ 700 |
| Accompanying person  | € 250 / $ 400 |
|  |  |
|  |  |
| \* please tick off appropriate |  |

Submit this registration form to email address: marsim2018@imsf.org

A separate Word version of the form has been sent to you to facilitate filling in.

The registration form can be seen separate from payment.

For planning purposes we highly appreciate the registration as soon as possible.

The conference fee payment can be done separately (later) according to previous section.