

Registration Form, SELIM 27

Title

Name

Surname(s)

Address

Postcode/ZIP

County/State/Province

Country

Institution

Telephone

E-mail

Are you a student?

Yes

No

Do you need an invoice?

Yes

No

Please send this registration form with a copy of your bank transfer to Dr. Rafael J. Pascual (selim27@ugr.es).

Please make sure that you indicate your name and surname in your bank payment, and that you use the word 'SELIM' as the payment reference.

REGULAR REGISTRATION FEE: **80€** (until April 1st) / **100€** (after April 1st)

STUDENT REGISTRATION FEE: **60€** (until April 1st) / **80€** (after April 1st)