



Registration form

Surname and Name:

Affiliation:

Title/degree:

E-mail address:

If you need an **invoice** please provide the details below:

Surname and Name:

.....

Institution:

.....

Address (compulsory to provide the city code):

.....

NIP (only for citizens in Poland):

Invoices will be handed out during the conference

Short biodata (to be included in the conference materials)

Paper's details:

Title:

Abstract (max. 500 words)