Registration Form

Wheats&Women International Conference

Please return the completed form with payment to: Accademia Nazionale delle Scienze detta dei XL Secretariat Wheats&Women International Conference Via Spallanzani 5/7 00186 ROME Italy Tel./fax.: +39 06 44250054	Privacy Statement: The Italian Privacy Law 196/2003 provides that, before your personal contact details can be published and may be made available to major sponsors, exhibitors and other parties directly related to the Congress, you must give your consent. If you do not consent to your contact details being provided to the above mentioned parties, please tick this line. If you do not tick this line we confirm your consent.
wheatsandwomen@accademiaxl.it	The Accademia delle Scienze, detta dei XL, is VAT exempt.

1. Participant Information (*Please print clearly in block capitals*)

Last Name:	Prof/Dr/Mr/Mrs/Ms/Miss/Other:			
First Name:				
Organisation:				
Position:				
		Country:		
Telephone: ()	Fax: () Mobile	9:	
Email:				
Name to appear on your	name badge (e.g. John Sm	nith):		
Special Requirements (di	etary or otherwise):			

2. Participant Registration

All prices are in \in . Registration fee does not include accommodation and excursions. Early registration fees before January 15th, 2018. Regular registration fee before March 30th, 2018. Late registration fee after March 30th, 2018. In case of cancellation, refunds are possible until April 30th, 2018, except for a handling fee of 30,00 \in . Full refunding for accompanying persons. No refunds are allowed after April 30th, 2018.

Registration Fees	
Regular participant (early fee 180€ - regular fee 240€ - late fee 300€)	
Student/PhD student (early fee 100€ - regular fee 150€ - late fee 200€)	
Accompanying person(s) (80€)	
SUB TOTAL	€
Money order payable to the Academy bank account: Accademia Nazionale delle Scienze detta dei XL – bank transfer reason: W Conference account number 66126510 BANCA FIDEURAM – V.le Parioli, 160 ROMA	Vheats&Women International

CIN I ABI 03296 - CAB 01601 - BIC/SWIFT: FIBKITMM **IBAN IT23I0329601601000066126510**

I understand and accept the conditions of the cancellation policy

Date _____

Signature _____

PLEASE KEEP A COPY FOR YOUR RECORDS