

**Registration form for the BLIS meeting**  
**3<sup>rd</sup> - 6th October 2001**  
**Institute for Storage Ring Facilities, University of Aarhus**

*Personal details*

Surname \_\_\_\_\_ Title: \_\_\_\_\_  
Firstname \_\_\_\_\_

*Address*

Department \_\_\_\_\_  
Institute \_\_\_\_\_  
Address \_\_\_\_\_  
Address \_\_\_\_\_  
Address \_\_\_\_\_  
Postcode \_\_\_\_\_  
Country \_\_\_\_\_

email address \_\_\_\_\_  
Telephone number\* \_\_\_\_\_  
Fax number\* \_\_\_\_\_

\*Please include the international dialing code

Please indicate when you intend to arrive for the meeting.

Day \_\_\_\_\_ Approximate Time \_\_\_\_\_

And the day you intend to leave

Day \_\_\_\_\_ Approximate Time \_\_\_\_\_

Do you require accommodation to be arranged for your stay in Aarhus: YES/NO

Please send this form either: via email as an attached file to Ruth Laursen (ruth@ifau.dk),  
by fax +45 86 12 07 40, or by post to

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