Family Name	
First Name	
Title	

Address

Department	
Institution	
Address line 1	
Address line 2	
City	
Postcode	
Country	
Email address	
Telephone no.*	

Partners name if	
attending	

✓

Room in the Adriatico	Twin room for single occupancy. Twin room for shared occupancy	
Name of sharer (if applicable)		
Arrival day/date		
Departure day/date		

## <u>Registration and Accommodation Fees</u> – please tick

		$\checkmark$
200 euro	Includes tea/coffees and lunches, the conference	
	dinner and programme.	
250 euro	For late registration	
50 euro	Partners cost for the conference dinner.	

200 euro 4 nights	Accommodation – <u>Adriactico</u> – Arrival 16 <sup>th</sup> and departure 20 <sup>th</sup> September	
425 euro 5 nights	Accommodation – <u>Riviera Hotel</u> -Single occupancy Arrival $16^{th}$ and departure $21^{st}$ September.	
650 euro 5 nights	Accommodation – <u>Riviera Hotel</u> –Double occupancy Arrival $16^{th}$ and departure $21^{st}$ September.	

Please indicate if you will be presenting a p	ooster Yes / No

Payment Method:

## **Bank Transfer**

You will be sent the bank details for bank transfer after you have submitted this registration form. If you do not receive these details please contact Beverley beverley.bishop@open.ac.uk.