

ERCIM Meetings in Pisa

4-5-6 November 2009

Please send by fax to: +39-050-3152811 or by email to: ercimpisa2009@isti.cnr.it

REGISTRATION FORM

REGISTRATION (Please use a typewriter or write in block capitals)		
Last name	First name	Middle initial
	t	
	_ City	
Country	Mobile	
Phone	Fax	
E-Mail		
Date of arrival: dd/mm/yy Estimated time of arrival:		
Date of departure: dd/mm/y	'Y	
Number of accompanying pe	rsons:	
AGENDA		
Working Groups: 4 th -5 th Nov	ember 🗖	
SOCIAL PROGRAMME		
Guided Tour of "Piazza dei M	iracoli": 5 th November (morning)	ax

Date: ______Signature: _____