

REGISTRATION FORM

XXIII Conference-Expedition of the Baltic Botanists

Please print and return by e-mail, regular mail or fax.

Date: July 19 – 22, 2009
Place: Haapsalu, Estonia

1. Participants information

Title: _____ Prof. Dr. other: _____ Mr. Ms. Mrs.

Family name: _____
First name: _____
Institution: _____
Address: _____

2. Conference Fee (includes admission to sessions, registration materials, coffee and field trips).

| | Before April 30, 2010 | After April 30, 2010 |
|----------------|------------------------------|-----------------------------|
| Conference fee | 80 Euro | 100 Euro |

- I wish to pay with credit card
 Master/Eurocard Visa American Express
- Credit card number : _____
Expiry date : _____
Cardholders name : _____
- I will transfer the sum to your account.
(account details will be sent separately)
- I'm a PhD student participating doctoral school (doctoral school will pay the expenses)

3. Accommodation

- I will need an accommodation in the Students Home
 I will book my own accommodation in Haapsalu

4. Food requirements

- I have no special requirements
 I need vegetarian food
 I have special requirements (specify) _____

5. Additional Instructions

E-mail: kadri.tali@emu.ee
Regular mail: Institute of Agricultural and Environmental Sciences, Riia 181, 51014 Tartu, Estonia
Fax: 372 7 383 013

Registration is fully completed after we receive your payment. You will receive a notification letter to confirm that.

Cancellations in writing are accepted until 15 June 2010. After June 15 2010 no refunds will be made.

Date: ___/___/2010_

Signature: _____