

REGISTRATION FORM

LAST NAME / FIRST NAME			
ADDRESS			
TEL. :		FAX :	
E-MAIL			
INSTITUTIONAL AFFILIATION POSITION / TITLE			

Please indicate your choice :

- I wish to attend the Colloquium
 I intend to present a paper

TITLE :

.....

Abstract (1000 to 1500 characters)

- I intend to present a poster

TITLE :

.....

Abstract (1000 to 1500 characters)

This registration form and the abstract should be sent **no later than January 31, 2012**, to
Prof. GIORDANA Trovabene

by e-mail : aiema.venezia@unive.it

by regular mail : **Prof. GIORDANA Trovabene**
Fondazione Università Ca' Foscari
Dorsoduro 3858 - 30123 VENEZIA (Italia)

