A picture containing text

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Registration form

Personal details \*

|  |  |  |
| --- | --- | --- |
| Title | : | Mr, Dr. (Post-doctoral fellow) |
| First name | : | Jaydeep |
| Last name | : | Belapure |
| E-mail | : | Jaydeep.belapure@bct.uni-halle.de |
| Contact details | : |  |
| Organisation | : | ZIK, MLU, Halle (Saale) |
| City | : | Halle (Saale), Germany |

Participation details

|  |  |
| --- | --- |
| Please select the days that you plan to attend the conference | |
| **On site**  Monday 13 March **YES / NO**  Tuesday 14 March **YES / NO**  Wednesday 15 March **YES / NO** | **Remotely via zoom (link will be provided)**  Monday 13 March **YES / ~~NO~~**  Tuesday 14 March **YES / ~~NO~~**  Wednesday 15 March **YES / ~~NO~~** |
| Do you plan to submit an e-poster? **YES / ~~NO~~** | |
| Registration forms will be sent to [pkarakousi@eie.gr](mailto:pkarakousi@eie.gr) | |
| For onsite attendance by **Friday 10th of March 2023** | For remote participation by **Monday 13th of March 2023** |

Graphical user interface, application

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