

REGISTRATION

Fill in the form and send it to $\underline{info@drafconference.com}$ to confirm your registration.

Full registration		One day registration		PhD		Accompanying person	
* Name:							
* Surname:							
* Country:							
* Institution/Company:							
* Department/Institute:							
* Tax code of receipt holder							
* City:							
* Address:							
* Zip Code:							
Telephone:							
* E-mail:							
* Attendance at the Welcome Cocktail (17/							
* Attendance at the Social dinner (19/6)							
** Attendance at the extra wine guided tour							
Day of participation	17/0	18/06		19/06	20/06	21/06	
** Accompanying person tour day 18/6							
** Accompanying person tour day 19/6							
** Accompanying person tour day 21/6							

*Mandatory fields

** Tickets available at the registration desk Information on www.drafconference.com