

COMBINATORICS 2004

September 12 – 18

REGISTRATION FORM

Please fill this form and send it by e-mail to

lucia.gionfriddo@dmi.unict.it

before May 31st 2004. Do not forget to indicate your e-mail address to receive our confirmation reply.

PERSONAL INFORMATION

Title _____

Name _____ Family name _____

E-mail _____

Phone _____ Fax _____

Web Page _____

AFFILIATION

Position _____

University or Institute _____

Department _____

Postal code _____ Street / P.O. Box _____

City _____

Country _____

CONTRIBUTION PAPER AND TALK

I plan to give a 15 minute talk. Title _____

I am attaching the pdf file of my abstract for the talk

I will send the pdf file of my abstract for the talk later by e-mail to lucia.gionfriddo@dmi.unict.it The deadline is June 30, 2004.

ACCOMPANYING PERSONS

Number _____

1) Name _____ Family name _____

Address _____

2) Name _____ Family name _____

Address _____

3) Name _____ Family name _____

Address _____

ACCOMODATION

I expect to arrive in Catania on September _____. Time _____

I expect to leave Catania on September _____. Time _____

____ I sent by fax the reservation form to the Hotel La Perla Ionica containing the following booking:

Type of room (DBL or DUS)_____ Arrangm. (BB or HB)_____

Number of rooms_____ Arrival date_____ Departure date_____

DBL = twin bedded room (2 persons)

BB = bed and breakfast arrangm.

DUS = double room single occupancy

HB = half board arrangm. (bed, breakfast, lunch)

REGISTRATION FEE(S)

Your registration will be complete after the payment of the registration fee(s).