

The BSRUN Seminar
“University - Business Partnerships for Innovation and Development”

REGISTRATION FORM

September 18, 2012

Saint-Petersburg

Please, complete the form carefully and do not leave any questions unanswered.

I. PERSONAL DATA			
Surname			
First name		Middle name	
Institution			
Position			
Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Citizenship
Address			
Phone		Fax	
E-mail			

II. HOTEL ACCOMMODATION			
I would like to book a room in the hotel		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Staying for (nr. of nights)		Room	Single <input type="checkbox"/> Double <input type="checkbox"/>
Arriving on		Leaving on	

III. TYPE OF PARTICIPATION	
Presenter <input type="checkbox"/>	Visitor <input type="checkbox"/>
Topic of presentation	
Language	Russian <input type="checkbox"/> English <input type="checkbox"/>

*The completed form should be either scanned or converted into .pdf form and sent to the Organizing Committee via email.

THANK YOU!

Organizing committee
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