**SLOPOS-15 registration form**

Participant information

Name\*:

Surname\*:

Title:

e-mail\*:

Institution\*:

Address\*:

Do you need invitation letter in order to get visa to Czech republic? Yes / No

Your contribution

Title:

Preferred type:

[ ]  oral contribution

[ ]  poster

[ ]  no preference

[ ]  without contribution

*Please note that there is a limit of one contribution per participant.*

*Leave the field Title blank if you do not know the title of your contribution yet. It can be specified later*

Social events & excursion

Do you require vegetarian food? Yes / No

Do you intend to join Laboratory tour to positron annihilation laboratory in Prague

and to Tandetron and cyclotron accelerators in Rez on 6.9. 2019, 14:00-18:00? Yes / No

Registration fee\*

[ ]  regular participant

[ ]  student

[ ]  commercial subject

Additional comments:

**Please fill this registration form and send it to the e-mail address**

**slopos-15@mff.cuni.cz**

*\*mandatory fields*