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**REGISTRATION FORM**

**to fill in and send back by 15/07/2022 to:**

**info@aimcinternational.org**

**XVII AIMC CONGRESS-Ravenna ITALY 2022**

**From 10 to 11 October 2022**

**AIMC ASSEMBLY meeting, Members΄ Dinner**

**9 October 2022**

**SURNAME:**

**NAME:**

**CITY:**

**COUNTRY:**

**E-mail:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **I request registration for the following events:** (tick the relevant boxes)**Participation to the XVII Congress and the exhibition** From Monday 10 to Tuesday 11 October 2022

|  |
| --- |
| **YES** |
|  |

**Participation to the XVII Congress** From Monday 10 to Tuesday 11 October 2022

|  |
| --- |
| YES |
|  |

**Name of person(s) accompanying the aimc member:** **Participation to the Assembly meeting (only for members)**Sunday 9 October 2022

|  |  |
| --- | --- |
| **YES** | **NO** |
|  |  |

**Participation to the members’ dinner** Sunday 9 October 2022

|  |  |
| --- | --- |
| **YES** | **NO** |
|  |  |

 **Number of persons:**

|  |
| --- |
|  |

**Payment method:**Bank remittance **(all charges are at the participant’s expense)**IBAN IT96Z0627013100CC0000033781

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|  |

**Paypal:** info@aimcinternational.orgPlease add 3 euros for remittance expenses

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|  |

 |  **euro 120****euro 100**   |
| **I ask to participate as a speaker:** **15 minutes presentations.** **Title of the presentation:**

|  |
| --- |
| **YES** |
|  |

Intervention language:

|  |  |
| --- | --- |
| **ITALIAN** | **ENGLISH** |
|  |  |

The presentation should be written in ITALIAN AND IN ENGLISH |

|  |  |  |  |
| --- | --- | --- | --- |
| **I ask to participate only to the exhibition**

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| --- |
| **YES** |
|  |

 |  **euro 50** |