**REGISTRATION FORM**

**to fill in and send back by OCTOBER 30, 2023 to:** [congresso.monreale2024@gmail.com](mailto:congresso.monreale2024@gmail.com)

**SURNAME:**

**NAME:**

**CITY:**

**COUNTRY:**

**E-mail:**

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| **I request registration to the following events:** (tick the relevant boxes)  **Participation to the XVIII Congress**   |  |  | | --- | --- | | **YES** | **NO** | |  |  |     **Visit of the towns Cefalù and Piazza Armerina-Villa del Casale**   |  |  | | --- | --- | | **YES** | **NO** | |  |  |   **Visit of the monuments and the historical center of the city of Palermo**   |  |  | | --- | --- | | **YES** | **NO** | |  |  |   **Visit of the monuments of the towns of Trapani and Marsala**   |  |  | | --- | --- | | **YES** | **NO** | |  |  | | **euro 150**    **euro 75**    **euro 38**  **euro** **70** |
| **I ask to participate as a speaker:** until **November 15, 2023** to: **congresso.monreale2024@gmail.com**   |  |  | | --- | --- | | **YES** | **NO** | |  |  |   Intervention language:   |  |  | | --- | --- | | **ITALIAN** | **ENGLISH** | |  |  | | |

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| **I ask to participate ONLY to the exhibition**   |  |  | | --- | --- | | **YES** | **NO** | |  |  | | **euro 70** |