Registration Form –Nordfjordeid (1.7.19 - 5.7.19)

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **First Name:** | | Click or tap here to enter text. | | | | | **Surname:** | | | Click or tap here to enter text. | |
| **Email:** | Click or tap here to enter text. | | | | | | **Phone:** |  | Click or tap here to enter text. | | |
| **Affiliation:** | | | Click or tap here to enter text. | | | | **Country:** | | Click or tap here to enter text. | | |
| **Date of Arrival:** | | | | | Click or tap to enter a date. | | **Date of Departure:** | | | Click or tap to enter a date. | |
| **Room:** | | | | Choose an item. | | |  | | | | |
| **Accompanying persons:** | | | | Yes | | No | **If yes, how many?** | | | | Click or tap here to enter text. |
|  | |  |
| **Will you need financial support?** | | | | Yes | | No | | | | | |
|  | |  | | | | | |
| **Will you need an invitation letter?** | | | | Yes | | No | | | | | |
|  | |  | | | | | |
| **Do you have allergies or dietary restrictions?** | | | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | | | |
| **Is there anything additional you would like us to know?** | | | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | | | |