## Registration Form –Nordfjordeid (1.7.19-5.7.19)

First Name:			Surname:	
Email:			Phone:	
Affiliation:			Country:	
Date of Arrival:			Date of Departure:	
Room(Single/Double (Note that that there are limited number of single rooms.)	e a		·	
Accompanying	Yes	No	If yes, how	
persons:			many?	
Will you need financial support?			Yes	No
(We do not cover travel. CV and letter of			. $\square$	
recommendation for master/PhD students and				
Postdocs need to be at			N.o.	
Will you need an in	vitation	letter?	Yes	No
Do you have allergies or dietary restrictions?				
Do you want to give a short talk?			Yes	No
(Title and abstract need to be attached.)				
Is there anything additional you would like us to know?				