



REGISTRATION FORM
II Academic Conference

Modern Challenges of Logistics

First name and surname:

Academic degree/title:

Affiliation:

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I declare to participate in the Conference: (insert X if applicable)

with the
paper presentation publication
ONLY

The title of the paper:

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I wish to receive an invoice.

Name and surname of the conference participant OR name of the institution:

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I authorize Sate University of Applied Sciences in Konin to issue an invoice without the recipient's signature.

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Completed and signed registration forms should be returned by email to
konferencja.logistyka@konin.edu.pl no later than **March 20th 2018.**