

REGISTRATION FORM

**6th European Symposium on Plant Lipids
07 - 10 July 2013, Bordeaux, France**

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┌ Euro Fed Lipid e.V. ┐
P.O. Box 90 04 40
60444 Frankfurt/ Main
Germany
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Please return the completed form (one per participant) no later than **06 June 2013** to the address on the left to take advantage of the early bird fee.
Phone +49 (69) 7917-345
Fax +49 (69) 7917-564

(Please print) Mr. Ms.

Last Name _____

First Name _____ Title _____

Company or Institute _____

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Scientific Programme - Registration Fee

Please indicate		Before 06 June	After 06 June
<input type="checkbox"/>	Euro Fed Lipid Member	EUR 250	EUR 300
<input type="checkbox"/>	Non-Member	EUR 300	EUR 350
<input type="checkbox"/>	Student (Member)*	EUR 125	EUR 175
<input type="checkbox"/>	Student (Non-Member)*	EUR 175	EUR 225

* proof required, e.g. copy of student card

- I would like to join Euro Fed Lipid as an Individual Member (€ 80/year, invoiced separately) and register as member
- I would like to join Euro Fed Lipid as a Student Member (€ 40/year, invoiced separately) and register as member

- I will wait for your invoice to pay by bank transfer
- Please charge my MasterCard Visa Amex number.....

Expiry Date.....CCV number :.....

(CCV number: the last three digits (MasterCard/Visa) or the last four digits (AMEX) of the printed number on your card.)

_____ Date

_____ Signature