**REGISTRATION FORM**

In order to register to the workshop please:

* fill the tables below and indicate if you will submit an abstract and whether you would like to be selected for an oral presentation and/or for a travel grant by marking the selected options with an **X**
* save the file as <***name\_surname\_registration.docx***>

send it by e-mail to: [sib2025.torino@gmail.com](mailto:sib2025.torino@gmail.com)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Surname** | **Department** | **Institution** | **e-mail** |
|  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Abstract** | | **Oral Presentation** | | **Academic position** | | | |
| **Yes** | **No** | **Yes** | **No** | **Undergraduate student** | **PhD student** | **Post-Doc** | **Senior** |
|  |  |  |  |  |  |  |  |
|  | |  | |  | | | |
| **Travel Grant application** | |  | |  | | | |
| **Yes** | **No** |  |  |  |  |  |  |
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| --- | --- |
| **\*Social Dinner June 9th 2025 (to be paid in advance by May 5nd, at the cost of 50€)** | |
| **Yes** | **No** |
|  |  |
| **Please indicate here any food intolerances** | |

*Information on payment and location will be sent to the participants.*

Please note that the seating number is limited.

Looking forward to seeing you in Torino,

The Organizing Committee