**REGISTRATION FORM Date……………..**

Please complete the **Registration Form** to register for the conference.

Once you filled the form, please send it by email to: [info@sibe2017.uniroma2.it](mailto:info@sibe2017.uniroma2.it)

|  |  |  |  |
| --- | --- | --- | --- |
| First Name |  | | |
| Last Name | female male | | |
| Title (Prof./Dr./Mr./Ms.) | Student Phd–Post doc Professionals or non-students | | |
| Department/Organisation |  | | |
| **VAT NUMBER or FISCAL CODE (\*)** |  | | |
| Street Address |  | | |
| City |  | | |
| Postal/Zip Code |  | Country |  |
| Name, Department/Organisation and Country to be shown on badge  **(if different from above)** |  | | |
| Telephone/Mobile No. |  | |  |
| E-mail address |  | | |
| Full name(s) of accompanying person(s)**\*\*** |  | | |
| If you need special assistance,  please specify | Dietary needs | | Access requirements |

**\*MANDATORY A*CCOMPANYING PERSON(S) – see below at “REGISTRATION FEES”.***

**TOPIC SELECTION -** Please select topics relevant to your areas of expertise:

Symposium 1: Advanced models and technologies for the study of Evolution

Symposium 2: Biogeography and Systematics

Symposium 3: Evo-Devo

Symposium 4: Evolution and Conservation

Symposium 5: Co-Evolution and Symbiosis

Symposium 6: Evolutionary and Behavioural Ecology

Symposium 7: The effects of drift and selection on populations and genomes: expectations and observations

Round Table: Popularization of Evolution

**REGISTRATION FEES for attending the Congress**

Registration fees include access to all symposia, general and poster sessions, refreshments during coffee/tea breaks, welcome cocktail.

*In order to register, double-click on the excel sheet below, you will be able to fill in grey cells having total amount of paying fees automatically calculated; or else please, use the right two columns for hand writing.*

**ON-SITE REGISTRATION**

**On-site registration (cash only)** from August 28, 2017;

**BANKING CHARGE = € 12**

**( FOR PAYMENTS COMING FROM NON-EU SEPA MEMBER COUNTRIES)**

\* **ACCOMPANYING PERSON(S)**

* Accompanying persons may not be co-author of any symposium, oral or poster presentation
* Registered accompanying persons have access to all symposia, oral and poster sessions, refreshments during coffee/tea breaks.
* Accompanying persons will NOT be allowed to accompany the speaker into the conference building/session unless they are a paying and registered at the conference.
* Accompanying persons will have their own badge however will not receive an attendance certificate

**Social dinner** (NOT included in the Registration fee)

I will attend the social dinner on August 30, 2017 ***yes*** ***no***

Number of accompanying person(s) who will attend the social dinner:

**TOTAL No. PEOPLE**

**PAYMENT**

Payments should be made only by bank transfer to the following account number:

**Bank transfer to**: Elly Travel srl

IBAN NUMBER: IT10U0760103200001010176061

BIC/SWIFT CODE: BPPIITRRXXX

**Description of payment:** SIBE 2017-Registration Fee (Name Participant) + dinner (if requested)

Please send copy of bank transfer to [info@sibe2017.uniroma2.it](mailto:info@sibe2017.uniroma2.it)

**Please remember**:

* Registration fees are NOT REFUNDABLE.
* The registration will only be valid AFTER receiving the registration form and copy of bank transfer
* Abstracts acceptance will be communicated to the authors by April 28, 2017
* “Early bird” registration is only valid for payments received from Feb 01 to May 10, 2017
* “Pre-Registration” is only valid for payments received from May 11 to July 31, 2017.
* **On-site registration (cash only)** from August 28, 2017.

If an **invoice is required** please, complete details in full with name and postal address to whom the invoice should be sent. ***Deadline for invoice is 28 August 2017.***

Name.............................................................................................................

Invoice Address................................................................................................

Invoice email address........................................................................................

**Invoice will be emailed to the email address stated above**

**IMPORTANT NOTE: Please specify whether the total amount of money in the invoice may also include the payment of accompanying person(s) or else the total should only refer your own registration fee.**

**ATTENDANCE CERTIFICATE**

All participants attending the Congress will receive an “Attendance Certificate” at the **“Welcome Desk”**

If you have any questions, please contact [info@sibe2017.uniroma2.it](mailto:info@sibe2017.uniroma2.it)