

First International Conference

Collaborative Biomedical Engineering For Open Source Medical Technologies

Registration form

Please compile this form in all its parts (all fields are required) and return it to ubora.conference@gmail.com, together with the proof of payment

Personal details

First Name	
Last Name	
Email	
Phone	

Bank transfer details

Account holder	Centro Piaggio - University of Pisa
Bank	Banca di Pisa e Fornacette
IBAN	IT77Y0856270910000011156668
Country	Italy
Payment description	UBORA2018CONF

Billing information

Institution	
Address	
City	
Country	
ZIP code	
Registration Type	<input type="checkbox"/> Full Delegate <input type="checkbox"/> Student (please provide proof of your student status by email together with the proof of your payment)

The invoice will be provided on-site

----- FOR DELEGATES FROM **ITALIAN PUBLIC INSTITUTION** ONLY -----

For the invoice, delegates from Italian public institution (including Universities) will have to provide the following codes (ask your administrative office for clarification):

Codice Identificativo Gara (CIG)	
Codice Unico di Progetto (CUP)	
Codice Univoco di Ufficio (IPA)	

The invoice will be provided after the conference.

Additional information

Are you submitting an abstract to the conference? ([Link to download the template](#))

- Yes
- No

If yes, please provide the title: _____

Any food requirements?

- Vegan
- Vegetarian
- Gluten Free
- None