

Preregistration Form

Title First Name Last Name

Sex: M / F

Affiliation/Institute

Address

.....

Town Country ZIP

Telephone Fax

E-mail Address

I will be attending the Conference and plan to present a paper.

I may attend the conference. Please put my name on the mailing list.

Will you be accompanied by guests? Yes No

(If yes, how many))

Would you like to be considered for financial support? Yes No

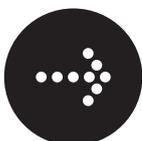
(If yes, at what level

.....)

I would prefer a 3 / 4 days pre / post conference tour in Tuscany.

Would you be interested in Transactions
in addition to Proceedings? Yes No

Please fill in the Pre-registration Form on the World Wide Web
(<http://www.elettra.trieste.it/ICALEPCS99>) or send it **before the 19 February 1999**
by e-mail, surface mail or fax to:



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