

APPLICATION FORM
X Conference
MATHEMATICAL MODELING IN PHYSICS AND ENGINEERING
Poraj – Częstochowa, 18-21 June 2018

PERSONAL DATA

First Name and Surname
Academic title/current position
Affiliation
E-mail
Phone number

INVOICE DETAILS

The name of the institution to which the invoice is to be issued

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TAX number
Street Number
Code Place

FORM OF PARTICIPATION

- oral presentation (occurrence of about 15 minutes)
- poster (format A1)
- without presentation

Presentation title:

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Co-authors:

Abstract (200-250 characters):

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ACCOMMODATION

- single room (limited number of rooms, extra cost of 100 PLN)
- 2-persons room, possibly a roommate
- 3-persons room, possibly roommates