

**REGISTRATION FORM**

**Training school -
Mould fungi : Assessment of mould risk**

**on JUNE 8th – 10th, 2015 in Bangor, Wales UK**

**NOTE: This registration requires approval by the FP 1303 SC**

**Family Name** ………………………………………………………………………...……...

**First Name** … ………………………….……………………………….…………

**Gender:** **male ☐ female ☐**

**Status: Bachelor/Master student** **☐** **PhD student ☐**

 **Other ☐**

**Organisation:** …

**Department:** … ……………………………………...…………..

**Address:**

…………………………………………………………………………...……….……….………

**Country:** … ………………………………………………...……….……

**Phone:** …………………………………………………...……….………

**E-mail:** … ………………………………………………...……….………

**Dietary preferences:** ………………………………………………………….....……….……

***Please mail this form before April 30th, 2015 to Simon Curling
(FP1303trainingschool@bangor.ac.uk)***